

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
09 APR 15 PM 4:48
Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Friends of Max Baucus

ADDRESS (number and street)

PO Box 586

Check if different than previously reported. (ACC)

Helena

MT

59624

2. FEC IDENTIFICATION NUMBER

C00328211

CITY

STATE

ZIP CODE

STATE DISTRICT

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

MT 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X 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 01 01 2009 through 03 31 2009

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 Chris Montague

Signature of Treasurer Electronically Filed by Chris Montague Date 04 15 2009

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

Office
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Only

FEC FORM 3
(Revised 02/2003)

FE5AN018

20020153465

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Max Baucus

Report Covering the Period:

From:

M M
0 1

D D
0 1

Y Y Y Y
2 0 0 9

To:

M M
0 3

D D
3 1

Y Y Y Y
2 0 0 9

	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)).....	204800.00	214350.00
(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)).....	204800.00	214350.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	123308.29	511046.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	9686.04	10847.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	113622.25	500199.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2324217.30	
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:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FE5AN018

29020153466

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Friends of Max Baucus

Report Covering the Period:

From:

MM DD YYYY
01 01 2009

To:

MM DD YYYY
03 31 2009

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).....

75550.00

77100.00

- (ii) Unitemized.....

0.00

0.00

- (iii) TOTAL of contributions
from individuals..... ►

75550.00

77100.00

0.00

0.00

- (b) Political Party Committees.....

- (c) Other Political Committees
(such as PACS).....

129250.00

137250.00

0.00

0.00

- (d) The Candidate.....

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

204800.00

214350.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

536.17

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.).....

9686.04

10847.28

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

2048.69

7172.22

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

216534.73

232905.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	123308.29	511046.95
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.....	86000.00	93000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	209308.29	604046.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2316990.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	216534.73
25. SUBTOTAL (add Line 23 and Line 24).....	2533525.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	209308.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2324217.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.	Full Name (Last, First, Middle Initial) Merribel S. Ayres	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 4301 Massachusetts Avenue, NW #5004	Transaction ID: C17947692
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Lighthouse Consulting Group	Occupation President
	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 500.00
B.	Full Name (Last, First, Middle Initial) Anne Bass	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 201 Main St. Suite 3100	Transaction ID: C17942054
	City State Zip Code Fort Worth TX 76102	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Keystone Inc.	Occupation Investor
	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 1000.00
C.	Full Name (Last, First, Middle Initial) Rodney Bench	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 1301 5th Avenue, Suite 3330	Transaction ID: C17937701
	City State Zip Code Seattle WA 98101	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer RA Bench	Occupation CLU
	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 2000.00
SUBTOTAL of Receipts This Page (optional)		3500.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 6 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Alec Berkman Mailing Address 714 W 11th St City State Zip Code Claremont CA 91711-3748 FEC ID number of contributing federal political committee. C Name of Employer Financial Kinetics Corporation Occupation Insurance owner Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 01 / 15 / 2009 Transaction ID: C17897459 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Holly Bode Mailing Address 3723 Albemarle St., NW City State Zip Code Washington DC 20016 FEC ID number of contributing federal political committee. C Name of Employer Washington Council Ernst & Young Occupation Senior Manager Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942064 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Thomas H. Boggs, Jr. Mailing Address 2550 M Street N.W. Suite 800 City State Zip Code Washington DC 20037 FEC ID number of contributing federal political committee. C Name of Employer Patton Boggs Occupation Partner and Chair Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942000 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2200.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 7 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Millicent Bohart Mailing Address 13919 196th Avenue, SE City State Zip Code Newcastle WA 98059 FEC ID number of contributing federal political committee. C Name of Employer RA Bench Occupation CLU Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1400.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C17937702 Amount of Each Receipt this Period 800.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Millicent Bohart Mailing Address 13919 196th Avenue, SE City State Zip Code Newcastle WA 98059 FEC ID number of contributing federal political committee. C Name of Employer RA Bench Occupation CLU Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1400.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C17937703 Amount of Each Receipt this Period 600.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Katharine R. Boyce Mailing Address 106 West Rosemont Avenue City State Zip Code Alexandria VA 22301 FEC ID number of contributing federal political committee. C Name of Employer Patton Boggs Occupation Partner Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942061 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1900.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Barry E. Carter</p> <p>Mailing Address 2922 45th St., NW</p> <p>City State Zip Code Washington DC 20016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Georgetown Univ. Occupation Professor</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942815</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Robert R. Carter</p> <p>Mailing Address 5501 Ravine Ridge Cove</p> <p>City State Zip Code Austin TX 78746-6435</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer National Partners Financial Occupation President</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 700.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 11 / 2009</p> <p>Transaction ID: C17902611</p> <p>Amount of Each Receipt this Period 700.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Steven M. Champlin</p> <p>Mailing Address 4800 Dexter Street, NW</p> <p>City State Zip Code Washington DC 20007</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer The Duberstein Group Occupation Vice President</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942819</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 2700.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:		PAGE 9 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Steven C. Demby Mailing Address 2301 E. Alameda Ave. City State Zip Code Denver CO 80209 FEC ID number of contributing federal political committee. C Name of Employer Brownstein, Hyatt & Farber Occupation Attorney Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947690 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) John A. DeViero Mailing Address 9417 Byeforde Road City State Zip Code Kensington MD 20895 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941988 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Ronald Dotzauer Mailing Address PO Box 1673 City State Zip Code Snohomish WA 98291 FEC ID number of contributing federal political committee. C Name of Employer Strategies 360 Occupation Founder and CEO Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942037 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Michael J. Driver</p> <p>Mailing Address 6500 Whaley Drive</p> <p>City State Zip Code Boulder CO 80303</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Patton Boggs</p> <p>Occupation Partner</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941999</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Michelle Easton</p> <p>Mailing Address 22 3rd St, NE</p> <p>City State Zip Code Washington DC 20002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Tarplin, Downs and Young, LLC</p> <p>Occupation Partner</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941975</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mark Elgin</p> <p>Mailing Address 1000 Urban Center Dr. Suite 650</p> <p>City State Zip Code Birmingham AL 35242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Stonegate Realty co.</p> <p>Occupation CEO</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 20 / 2009</p> <p>Transaction ID: C17947675</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 3000.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:		PAGE 11 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) J. Norman Estes Mailing Address 11142 Telmar Dr. City Northport State AL Zip Code 35475 FEC ID number of contributing federal political committee. C Name of Employer Northport Health Services Inc. Occupation President Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942067 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Rebecca Estes Mailing Address 11142 Telmar Dr. City Northport State AL Zip Code 35475 FEC ID number of contributing federal political committee. C Name of Employer homemaker Occupation homemaker Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942069 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Linda Evans Mailing Address 1720 Legighton Wood Lane City Silver Spring State MD Zip Code 20910 FEC ID number of contributing federal political committee. C Name of Employer IBM Occupation Executive, Global Tax & Finance Policy Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 11 / 2009 Transaction ID: C17942817 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		4200.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 12 / 110	
(check only one)			
<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)
Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Kathryn E. Farnsworth Mailing Address 110 Dupont Drive City State Zip Code Lander WY 82520 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Political Consultant Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941984 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Michael A. Forscey Mailing Address 2445 M Street, NW City State Zip Code Washington DC 20037 FEC ID number of contributing federal political committee. C Name of Employer Forscey & Slinson Occupation Managing Partner Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941964 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) James C. Gould Mailing Address 4718 N. 36th Street City State Zip Code Arlington VA 22207 FEC ID number of contributing federal political committee. C Name of Employer Capitol Counsel Occupation Attorney Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947667 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number only)		

20020153476

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Micah S. Green</p> <p>Mailing Address 10413 Democracy Lane</p> <p>City State Zip Code Potomac MD 20854</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Patton Boggs LLP</p> <p>Occupation Partner</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941954</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mark Hanna</p> <p>Mailing Address 317 Merrilee Pl.</p> <p>City State Zip Code Danville CA 94526</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hanna Global Solutions</p> <p>Occupation CEO</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941948</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Patrick Heck</p> <p>Mailing Address 1205 Darmouth Rd.</p> <p>City State Zip Code Alexandria VA 22314</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer K&L Gates</p> <p>Occupation Partner</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941974</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 2200.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Wallace F. Holladay

Mailing Address 3400 Idaho Avenue, NW
Suite 500

City State Zip Code

Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Holladay Corporation

Occupation
Chairperson

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941951

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Donald L. Jemigan, Ph.D.

Mailing Address 477 Country Club Dr.

City State Zip Code

Longwood FL 32750

FEC ID number of contributing
federal political committee.

C

Name of Employer
Adventist Health System

Occupation
Executive Vice President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941965

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Eleanor Johnson

Mailing Address 827 Windsor Dr. SE

City State Zip Code

Sammamish WA 98074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906854

Amount of Each Receipt this Period

1700.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) John F. Jones	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Mailing Address 5840 Colfax Ave.	Transaction ID: C17941996
City State Zip Code Alexandria VA 22311	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Patton Boggs Partner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00	
B. Full Name (Last, First, Middle Initial) James R. Jones	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Mailing Address 317 East Capitol St., DC	Transaction ID: C17941950
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Mannatt Phelps Co-Chairperson	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	
C. Full Name (Last, First, Middle Initial) Arthur Keiser	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Mailing Address 6069 NW 87th Avenue	Transaction ID: C17942004
City State Zip Code Parkland FL 33067	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Keiser University President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Alixandria Lapp

Mailing Address 114 S. Cherry Street

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parven Pomper Strategies

Occupation

Government Affairs

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C17949155

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dawn A. Levy

Mailing Address 5651 Clouds Mill Drive

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cassidy and Associates

Occupation

Consultant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942046

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dawn A. Levy

Mailing Address 5651 Clouds Mill Drive

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cassidy and Associates

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942045

Amount of Each Receipt this Period

2400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

29020153480

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 110
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Michael B. Levy</p> <p>Mailing Address 230 8th Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brownstein Hyatt & Farber Occupation Legislative Consultant</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17942035</p> <p>Amount of Each Receipt this Period 1500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ben J. Lipps</p> <p>Mailing Address 95 Hayden Lane</p> <p>City Lexington State MA Zip Code 02421</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Fresenius Medical Care Occupation Global Chairperson</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941983</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Robert Martinez</p> <p>Mailing Address 104 Dulany Place</p> <p>City Falls Church State VA Zip Code 22046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Williams and Jensen Occupation Attorney</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941971</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>	<p>3500.00</p>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 18 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Michael McAdams Mailing Address 3849 North Upland St. City Arlington State VA Zip Code 22207 FEC ID number of contributing federal political committee. C Name of Employer Brownstein Hyatt Farber Schreck Occupation Policy director Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947678 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) James McKeone Mailing Address 4 Cresswell Ln City Hingham State MA Zip Code 02043 FEC ID number of contributing federal political committee. C Name of Employer self employed -AALU memeb-er Occupation consultant Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 02 / 02 / 2009 Transaction ID: C17900378 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Van McMurtry Mailing Address 1928 Biltmore St, NW City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. C Name of Employer Parven Pomper Occupation Lobbyist Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941972 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3500.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bruce S. Meier</p> <p>Mailing Address 327 Central Park West No. 5A</p> <p>City State Zip Code New York NY 10025</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer On Site Psychological Services</p> <p>Occupation Psychologist</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 31 / 2009</p> <p>Transaction ID: C17950472</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mike Molewski</p> <p>Mailing Address 1611 Stonehill Way</p> <p>City State Zip Code Bethlehem PA 18015-8964</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Molewski Financial Partners</p> <p>Occupation President</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 01 / 15 / 2009</p> <p>Transaction ID: C17897458</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Tracy Montross</p> <p>Mailing Address 3754 Winding Creek Lane</p> <p>City State Zip Code Charlotte NC 28226</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt MM / DD / YYYY 01 / 15 / 2009</p> <p>Transaction ID: C17897457</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 1300.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Peter Mullin

Mailing Address 644 S. Figueroa St.
2nd Fl

City State Zip Code
Los Angeles CA 90017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mullin TBG

Occupation
Chairman Emeritus

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906856

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Laura Neal

Mailing Address 4721 46th Street, NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cassidy and Associates

Occupation
Senior Vice President

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
02 / 25 / 2009

Transaction ID: C17937704

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

William Neville

Mailing Address PO Box 3040

City State Zip Code
Kingshill VI 00851-3040

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Viking, LLC

Occupation
Manager

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C17950426

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

William C. Oldaker

Mailing Address 11001 Piney Meetinghouse Road

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing federal political committee.

C

Name of Employer
Oldaker Biden and Belair
LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY
03 / 11 / 2009

Transaction ID: C17942650

Amount of Each Receipt this Period

2400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

William C. Oldaker

Mailing Address 11001 Piney Meetinghouse Road

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing federal political committee.

C

Name of Employer
Oldaker Biden and Belair
LLP

Occupation
Attorney

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY
03 / 11 / 2009

Transaction ID: C17942651

Amount of Each Receipt this Period

2400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Jonathan M. Orloff

Mailing Address 1820 Belmont Road, NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing federal political committee.

C

Name of Employer
Capitol Partners, Inc

Occupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942005

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

William S. Owen

Mailing Address 601 S. Concord Street
Suite 200

City State Zip Code

Knoxville TN 37919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assets Equity Corporation

Occupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906857

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

scott parven

Mailing Address 8817 sleepy hollow lane

City State Zip Code

potomac MD 20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
PPS Inc

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 03 / 2009

Transaction ID: C17939776

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Brian Pomper

Mailing Address 6202 Beachway Drive

City State Zip Code

Falls Church VA 22041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parven Pomper Strategies

Occupation
Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 02 / 2009

Transaction ID: C17939761

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

6000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 23 / 110	
(check only one)			
<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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Timothy Earl Punke Mailing Address 1912 26th Ave E City Seattle State WA Zip Code 98112 FEC ID number of contributing federal political committee. C Name of Employer Monument Policy Group Occupation Consultant / Lawyer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2009 Transaction ID: C17941851 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Molly M. Raiser Mailing Address 3318 O Street N.W. City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. C Name of Employer homemaker Occupation homemaker Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 02 / 16 / 2009 Transaction ID: C17906853 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mark Richards Mailing Address 556 Columbine Street City Denver State CO Zip Code 80206 FEC ID number of contributing federal political committee. C Name of Employer The Madison Group Occupation Estate Planning Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 02 / 2009 Transaction ID: C17900380 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		3500.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 24 / 110	
(check only one)			
<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)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Frank Schreck</p> <p>Mailing Address 3083 Red Arrow Drive</p> <p>City Las Vegas State NV Zip Code 89135</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brownstein Hyatt Farber Schreck Schreck Occupation Attorney</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942824</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Steve Shirley</p> <p>Mailing Address 142 Charleston Lane</p> <p>City Madison State MS Zip Code 39110</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer John Hancock John Hancock Occupation Vice President</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 01 / 29 / 2009</p> <p>Transaction ID: C17899488</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Gerald Sigal</p> <p>Mailing Address 2909 44th St, NW</p> <p>City Washington State DC Zip Code 20016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sigal Construction Sigal Construction Occupation Chairperson</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 31 / 2009</p> <p>Transaction ID: C17950455</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 2500.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) C. Kyle Simpson</p> <p>Mailing Address 1350 I Street, NW Suite 510</p> <p>City Washington State DC Zip Code 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brownstein Hyatt Farber Schreck Occupation Policy director</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17942034</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jonathan Slade</p> <p>Mailing Address 10613 Gainsborough Road</p> <p>City Potomac State MD Zip Code 20854</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer The Cormac Group Occupation Principal</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17942001</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Scott Slater</p> <p>Mailing Address 21 East Carrillo St.</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brownstein Hyatt Farber Schreck LLP Occupation Shareholder</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 20 / 2009</p> <p>Transaction ID: C17947711</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 3000.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Tracy Spicer

Mailing Address 5105 nahant street

City

bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Avenue Solutions

Occupation
consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 01 / 2009

Transaction ID: C17938587

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Amy Tejral

Mailing Address 1210 R Street NW
#209

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Avenue Solutions

Occupation
Lobbyist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 01 / 2009

Transaction ID: C17938601

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Harry E Thomas

Mailing Address 284 Woodcock Lane

City

Ambler

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Karr Barth Associates

Occupation
CLU

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
01 / 15 / 2009

Transaction ID: C17897460

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Robert Van Heuvelen

Mailing Address 4504 Middleton Lane

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
VH Strategies

Occupation

Political Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942060

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mark R. Vogel

Mailing Address 3389 Sheridan Street
Apt. 424

City

Hollywood

State

FL

Zip Code

33021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Sarah Walter

Mailing Address 7111 Capitol View Drive

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Walter Consulting

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941973

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

William E. Whitaker

Mailing Address 1200 5th Ave.
Suite 600

City

Seattle

State

WA

Zip Code

98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Life Insurance Underwriter

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 25 / 2009

Transaction ID: C17937700

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Timothy Zenk

Mailing Address 2917 11th Avenue West

City

Seattle

State

WA

Zip Code

98119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sapphire Energy

Occupation

VP Corporate Affairs

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942041

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

75550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Abbot Laboratories Better Government Fund		Date of Receipt MM / DD / YYYY 03 / 31 / 2009	
Mailing Address		1399 New York Ave NW Suite 200		Transaction ID: C17950460	
City		State		Zip Code	
Washington		DC		20005	
FEC ID number of contributing federal political committee.		C C00040279		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
B.		Full Name (Last, First, Middle Initial) Accenture PAC		Date of Receipt MM / DD / YYYY 03 / 31 / 2009	
Mailing Address		800 Connecticut Ave., NW Suite 600		Transaction ID: C17950465	
City		State		Zip Code	
Washington		DC		20006	
FEC ID number of contributing federal political committee.		C C00300707		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
C.		Full Name (Last, First, Middle Initial) American Academy of Dermatology Association PAC		Date of Receipt MM / DD / YYYY 03 / 09 / 2009	
Mailing Address		1350 I Street, NW Suite 880		Transaction ID: C17941992	
City		State		Zip Code	
Washington		DC		20005-3319	
FEC ID number of contributing federal political committee.		C C00359539		Amount of Each Receipt this Period 5000.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00			
SUBTOTAL of Receipts This Page (optional)				7000.00	
TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Academy of Dermatology Association PAC</p> <p>Mailing Address 1350 I Street, NW Suite 880</p> <p>City Washington State DC Zip Code 20005-3319</p> <p>FEC ID number of contributing federal political committee. C C00359539</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 10000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941993</p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION FOR JUSTICE POLITIC</p> <p>Mailing Address 1050 31st Street N.W.</p> <p>City Washington State DC Zip Code 20007</p> <p>FEC ID number of contributing federal political committee. C C00024521</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941963</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American College of Surgeons Professional</p> <p>Mailing Address Association PAC 1640 Wisconsin Ave., NW</p> <p>City Washington State DC Zip Code 20007</p> <p>FEC ID number of contributing federal political committee. C C00382424</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942818</p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 12500.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Council of Life Insurers PAC</p> <p>Mailing Address 101 Constitution Avenue NW Suite 700 West</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. C C00147066</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942816</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Crystal Sugar Company</p> <p>Mailing Address PAC 101 North 3rd Street</p> <p>City Moorehead State MN Zip Code 56560</p> <p>FEC ID number of contributing federal political committee. C C00110338</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 20 / 2009</p> <p>Transaction ID: C17947686</p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Federation of Musicians</p> <p>Mailing Address 1501 BROADWAY SUITE 600 PARAMOUNT BUILDING</p> <p>City NEW YORK State NY Zip Code 10036</p> <p>FEC ID number of contributing federal political committee. C C00073627</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 31 / 2009</p> <p>Transaction ID: C17950458</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 7000.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Nurses Association PAC</p> <p>Mailing Address 600 Maryland Avenue S.W. Suite 100 West</p> <p>City Washington State DC Zip Code 20024</p> <p>FEC ID number of contributing federal political committee. C C00017525</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 31 / 2009</p> <p>Transaction ID: C17950457</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Psychiatric Association PAC</p> <p>Mailing Address 1000 Wilson Boulevard Suite 1825</p> <p>City Arlington State VA Zip Code 22209</p> <p>FEC ID number of contributing federal political committee. C C00373696</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 20 / 2009</p> <p>Transaction ID: C17947703</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN SOC OF APPRAISERS POLITICAL ACTION CMTE</p> <p>Mailing Address 555 HERNDON PARKWAY, SUITE 125 C/O HARRIET DAVIS</p> <p>City HERNDON State VA Zip Code 20170</p> <p>FEC ID number of contributing federal political committee. C C00237263</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941955</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 33 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUAR Mailing Address 4245 N Fairfax Drive Suite 750 City State Zip Code Arlington VA 22203 FEC ID number of contributing federal political committee. C C00333104 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 03 / 11 / 2009 Transaction ID: C17942821 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) American Sugarbeet Growers Association Political A Mailing Address 1156 15th St Nw Suite 1101 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. C C00167684 Name of Employer Occupation Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947684 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Association Of Progressive Rental Organizations Po Mailing Address 1504 Robin Hood Trail Houston Bldg #220 City State Zip Code Austin TX 78703 FEC ID number of contributing federal political committee. C C00166223 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947664 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		6500.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)
BEST BUY CO., INC EMPLOYEE POLITICAL FORUM
Mailing Address 7601 Penn Avenue South

City State Zip Code
Richfield MN 55423

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947698

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Cardinal Health, Inc. PAC
Mailing Address 7000 Cardinal Place

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee. **C** C00332833

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941967

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Cubic Corporation Employees PAC
Mailing Address 9333 Balboa Ave. M/S 10-2

City State Zip Code
San Diego CA 92123

FEC ID number of contributing federal political committee. **C** C00151787

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942048

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)
Diageo North America, Inc. Employees Political

Mailing Address Participation Committee
750 East Mai St.

City State Zip Code
Stamford CT 06902

FEC ID number of contributing
federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C17896789

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Esop Association Pac

Mailing Address 1726 M Street, Nw Suite 501

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906855

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Food Marketing Institute PAC - Food PAC

Mailing Address 655 15th ST., NW suite 700

City State Zip Code
Washington DC 20005-5701

FEC ID number of contributing
federal political committee. **C** C00014555

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942059

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 36 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Fresenius Medical Care North America Political Act</p> <p>Mailing Address 1875 Eye Street Nw 12th Floor</p> <p>City Washington State DC Zip Code 20006</p> <p>FEC ID number of contributing federal political committee. C C00401299</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 20 / 2009</p> <p>Transaction ID: C17947709</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p>B.</p> <p>Full Name (Last, First, Middle Initial) General Aviation Manufacturers PAC</p> <p>Mailing Address 1400 K Street N.W. Suite 801</p> <p>City Washington State DC Zip Code 20005</p> <p>FEC ID number of contributing federal political committee. C C00014878</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941962</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Great Lakes Sugar Beet Growers Association PAC</p> <p>Mailing Address 4800 Fashion Square Blvd, Suite 48</p> <p>City Saginaw State MI Zip Code 48604</p> <p>FEC ID number of contributing federal political committee. C C00168542</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17942050</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p>SUBTOTAL of Receipts This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>		<p>4500.00</p>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)
HAWKER BEECHCRAFT INC POLITICAL ACTION COMMITTEE (

Mailing Address PO Box 85
9709 E. Central

City State Zip Code
Wichita KS 67201

FEC ID number of contributing
federal political committee. **C** C00434183

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941958

Amount of Each Receipt this Period

1250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

HCA Good Government Fund

Mailing Address One Park Plaza, PO Box 550

City State Zip Code
Nashville TN 37202-0550

FEC ID number of contributing
federal political committee. **C** C00067231

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942042

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Holland and Knight Committee for

Mailing Address Effective Government
2099 Pennsylvania Ave., NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947665

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF HOLIDAY INNS

Mailing Address THREE RAVINIA DR SUITE 100

City

ATLANTA

State

GA

Zip Code

30346

FEC ID number of contributing
federal political committee.

C

C00084822

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941969

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Jewelers of America Inc PAC

Mailing Address 52 VANDERBILT AVE 19TH FL

City

NEW YORK

State

NY

Zip Code

10036

FEC ID number of contributing
federal political committee.

C

C00333666

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C17950467

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

KIDNEY CARE PARTNERS POLITICAL ACTION COMMITTEE (K

Mailing Address 13948 MARBLESTONE DRIVE
C/O SUSAN MURDOCK

City

CLINTON

State

VA

Zip Code

20124

FEC ID number of contributing
federal political committee.

C

C00431924

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947673

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Miller & Chevalier Chartered PAC

Mailing Address 655 15th St., NW No. 900

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00255216

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C17950464

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Minn-dak Farmers Cooperative Political Action Comm

Mailing Address 7525 Red River Road

City

Wahpeton

State

ND

Zip Code

58075

FEC ID number of contributing
federal political committee.

C C00164939

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941979

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Monsanto Company Citizenship Fund Aka Monsanto Cit

Mailing Address 1300 I St, NW
Ste. 450E

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00042069

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947668

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 40 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) NAADAC The Association For Addiction Professionals Mailing Address 901 N Washington St Suite 600 City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. C C00293100 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941987 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) National Association Of Chain Drug Stores, Inc. Po Mailing Address P O Box 1417-d49 City State Zip Code Alexandria VA 22313 FEC ID number of contributing federal political committee. C C00022368 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947693 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF INDEPENDENT LIFE BROKERAGE Mailing Address 228 S WASHINGTON ST STE 115 City State Zip Code ALEXANDRIA VA 22314 FEC ID number of contributing federal political committee. C C00422204 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941959 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		4500.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 41 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) National Association of Insurance and Financial Ad Mailing Address 2901 Telestar Court City Falls Church State VA Zip Code 22042 FEC ID number of contributing federal political committee. C C00005249 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942043 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) National Committee To Preserve Social Security And Mailing Address 10 G Street Ne, Suite #600 Suite 600 City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. C C00172296 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942070 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) National Multi Housing Council Political Action Co Mailing Address 1850 M Street Nw Suite 540 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. C C00130773 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17941990 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		8000.00
TOTAL This Period (last page this line number only) ▶		

29020153505

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 110
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

National Pork Producers Council Pork Pac

Mailing Address Po Box 10383/1776

City

Des Moines

State

IA

Zip Code

50306

FEC ID number of contributing
federal political committee.

C C00201871

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941953

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Northwestern Mutual Life Insurance Company Federal

Mailing Address 720 E Wisconsin Ave

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing
federal political committee.

C C00197095

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947683

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

PILLSBURY WINTHROP SHAW PITTMAN LLP POLITICAL ACTI

Mailing Address 50 Fremont St.

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C C00177972

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941960

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 43 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Plum Creek Timber Company Good Government Fund Mailing Address 999 Third Avenue Suite 2300 City Seattle State WA Zip Code 98104 FEC ID number of contributing federal political committee. C C00255224 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942055 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) PPL People For Good Government (pplpgg) Mailing Address Two North Ninth Street City Allentown State PA Zip Code 18101 FEC ID number of contributing federal political committee. C C00228106 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947679 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Retail Leaders PAC Mailing Address 1700 N. Moore Street Suite 2250 City ARLINGTON State VA Zip Code 22209 FEC ID number of contributing federal political committee. C C00112763 Name of Employer Occupation Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947696 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		11000.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

PAGE 44 / 110

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

ROCKWELL COLLINS INC. GOOD GOVERNMENT COMMITTEE

Mailing Address 1300 Wilson Boulevard #200

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.

C

C00365684

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947707

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Sheet Metal Worker's International Association

Mailing Address 1750 NEW YORK AVE NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

C00007542

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942052

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Southern Minnesota Sugar Cooperative Political Act

Mailing Address P O Box 500

City

Renville

State

MN

Zip Code

56284

FEC ID number of contributing
federal political committee.

C

C00166348

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941977

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Target Citizens Political Forum</p> <p>Mailing Address 1000 Nicollet Mall Tps 3275</p> <p>City State Zip Code Minneapolis MN 55403</p> <p>FEC ID number of contributing federal political committee. C C00098061</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17942038</p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Teachers Insurance Annuity Assoc. PAC</p> <p>Mailing Address 1101 PENNSYLVANIA AVE NW SUITE 800</p> <p>City State Zip Code WASHINGTON DC 20004</p> <p>FEC ID number of contributing federal political committee. C C00431361</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C17906858</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Tenet Healthcare Corporation Pac</p> <p>Mailing Address 13737 Noel Road, Suite 100</p> <p>City State Zip Code Dallas TX 75240</p> <p>FEC ID number of contributing federal political committee. C C00119354</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2009</p> <p>Transaction ID: C17942814</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 10000.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Textron PAC		Date of Receipt MM / DD / YYYY 03 / 24 / 2009	
Mailing Address		ATTN: Cal Whitehurst 1101 Pennsylvania Avenue, NW		Transaction ID: C17948444	
City		State		Zip Code	
Washington		DC		20004	
FEC ID number of contributing federal political committee.		C C00123612		Amount of Each Receipt this Period 1500.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00			
B.		Full Name (Last, First, Middle Initial) TYPAC		Date of Receipt MM / DD / YYYY 03 / 09 / 2009	
Mailing Address		PO BOX 2020		Transaction ID: C17942007	
City		State		Zip Code	
SPRINGDALE		AR		72765	
FEC ID number of contributing federal political committee.		C C00169821		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
C.		Full Name (Last, First, Middle Initial) U.A. Political Education Committee		Date of Receipt MM / DD / YYYY 03 / 11 / 2009	
Mailing Address		901 Massachusetts Avenue, NW		Transaction ID: C17942822	
City		State		Zip Code	
Washington		DC		20001	
FEC ID number of contributing federal political committee.		C C00012476		Amount of Each Receipt this Period 5000.00	
Name of Employer		Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00			
SUBTOTAL of Receipts This Page (optional)				7500.00	
TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Unitedhealth Group Incorporated Political Fund

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343

FEC ID number of contributing
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17942114

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

VAN NESS FELDMAN PC POLITICAL ACTION COMMITTEE(AKA

Mailing Address 1050 THOMAS JEFFERSON ST NW STE700

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C C00205369

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2009

Transaction ID: C17941994

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Walgreen Co Pac

Mailing Address 200 WILMOT ROAD MS #2255

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C C00160770

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947705

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 48 / 110	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) WESTERN SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE Mailing Address 400 GREAT WESTERN AVE City LOVELL State WY Zip Code 82431 FEC ID number of contributing federal political committee. C C00446674 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2009 Transaction ID: C17947701 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Weyerhaeuser Company Political Action Committee Mailing Address Ch1m31 City Federal Way State WA Zip Code 98063 FEC ID number of contributing federal political committee. C C00007948 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942049 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Williams & Jensen Pc Political Action Committee (w) Mailing Address 1155 21st Street Nw Suite 300 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. C C00039206 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C17942039 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		7000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 110

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Xcel Energy Employee PAC

Mailing Address 1225 17th Street

Suite 900

City

Denver

State

CO

Zip Code

80202

FEC ID number of contributing
federal political committee.

C C00107771

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C17950452

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

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

129250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City State Zip Code Purchase NY 10577</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 459.20</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C17906850</p> <p>Amount of Each Receipt this Period 77.94</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City State Zip Code Purchase NY 10577</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 459.20</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C17906851</p> <p>Amount of Each Receipt this Period 58.08</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City State Zip Code Purchase NY 10577</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 459.20</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C17906852</p> <p>Amount of Each Receipt this Period 99.10</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 235.12</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 110

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City State Zip Code Purchase NY 10577</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 459.20</p>	<p>Date of Receipt MM / DD / YYYY 03 / 09 / 2009</p> <p>Transaction ID: C17941945</p> <p>Amount of Each Receipt this Period 104.35</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Congressional House Associates, LLC</p> <p>Mailing Address 419 East Capitol Street, SE</p> <p>City State Zip Code Washington DC 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1450.36</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C17906847</p> <p>Amount of Each Receipt this Period 1450.36</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Corental Property Management Inc.</p> <p>Mailing Address 435 South Main Street PO Box 1894</p> <p>City State Zip Code Kalispell MT 59903</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 978.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 18 / 2009</p> <p>Transaction ID: C17933232</p> <p>Amount of Each Receipt this Period 978.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 2532.71</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 110

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address PO Box 371461

City

Pittsburgh

State

PA

Zip Code

15250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

162.71

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906846

Amount of Each Receipt this Period

162.71

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Flathead Electric Cooperative, Inc.

Mailing Address 2510 US Highway 2 East

City

Kalispell

State

MT

Zip Code

59901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.00

Date of Receipt

MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C17896788

Amount of Each Receipt this Period

196.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Flathead Electric Cooperative, Inc.

Mailing Address 2510 US Highway 2 East

City

Kalispell

State

MT

Zip Code

59901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.00

Date of Receipt

MM / DD / YYYY
01 / 15 / 2009

Transaction ID: C17897455

Amount of Each Receipt this Period

132.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

490.71

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 110

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mid-Rivers Telephone Co-Op, Inc.</p> <p>Mailing Address PO box 280 904 C Avenue</p> <p>City State Zip Code Circle MT 59215</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 112.43</p>	<p>Date of Receipt MM / DD / YYYY 02 / 18 / 2009</p> <p>Transaction ID: C17933230</p> <p>Amount of Each Receipt this Period 112.43</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Progressive</p> <p>Mailing Address PO Box 94739</p> <p>City State Zip Code Cleveland OH 44101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1517.00</p>	<p>Date of Receipt MM / DD / YYYY 01 / 15 / 2009</p> <p>Transaction ID: C17897456</p> <p>Amount of Each Receipt this Period 1517.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City State Zip Code Bismarck ND 58506-5508</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1179.61</p>	<p>Date of Receipt MM / DD / YYYY 01 / 15 / 2009</p> <p>Transaction ID: C17897453</p> <p>Amount of Each Receipt this Period 218.61</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 1848.04</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 54 / 110	
(check only one)			
<input 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 checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Qwest Mailing Address Box 5508 City State Zip Code Bismarck ND 58506-5508 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1179.61		Date of Receipt MM / DD / YYYY 02 / 16 / 2009 Transaction ID: C17906848 Amount of Each Receipt this Period 89.89 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Qwest Mailing Address Box 5508 City State Zip Code Bismarck ND 58506-5508 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1179.61		Date of Receipt MM / DD / YYYY 02 / 18 / 2009 Transaction ID: C17933229 Amount of Each Receipt this Period 127.86 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Qwest Mailing Address Box 5508 City State Zip Code Bismarck ND 58506-5508 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1179.61		Date of Receipt MM / DD / YYYY 02 / 18 / 2009 Transaction ID: C17933231 Amount of Each Receipt this Period 55.79 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		273.54
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 110

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

State of Montana

Mailing Address PO Box 6339

City

Helena

State

MT

Zip Code

59604-6339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3425.92

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C17947663

Amount of Each Receipt this Period

3425.92

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Travelers

Mailing Address CL Remittance Center

City

Hartford

State

CT

Zip Code

06183-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

MM / DD / YYYY
01 / 15 / 2009

Transaction ID: C17897454

Amount of Each Receipt this Period

818.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Travelers

Mailing Address CL Remittance Center

City

Hartford

State

CT

Zip Code

06183-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C17906849

Amount of Each Receipt this Period

62.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4305.92

TOTAL This Period (last page this line number only)

9686.04

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 110

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

DA Davidson and Co.

Mailing Address PO Box 2040

City

State

Zip Code

Billings

MT

59103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1869.27

Date of Receipt

MM / DD / YYYY
01 / 31 / 2009

Transaction ID: C17904792

Amount of Each Receipt this Period

422.02

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

DA Davidson and Co.

Mailing Address PO Box 2040

City

State

Zip Code

Billings

MT

59103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1869.27

Date of Receipt

MM / DD / YYYY
02 / 28 / 2009

Transaction ID: C17955158

Amount of Each Receipt this Period

241.59

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

DA Davidson and Co.

Mailing Address PO Box 2040

City

State

Zip Code

Billings

MT

59103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1869.27

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C17955159

Amount of Each Receipt this Period

155.50

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

819.11

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:		PAGE 57 / 110	
(check only one)			
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.	Full Name (Last, First, Middle Initial) Wells Fargo	Date of Receipt MM / DD / YYYY 01 / 31 / 2009
	Mailing Address 350 N. Last Chance Gulch	Transaction ID: C17900446
	City Helena State MT Zip Code 59601	Amount of Each Receipt this Period 669.97
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5302.95	
B.	Full Name (Last, First, Middle Initial) Wells Fargo	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 350 N. Last Chance Gulch	Transaction ID: C17940023
	City Helena State MT Zip Code 59601	Amount of Each Receipt this Period 326.66
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5302.95	
C.	Full Name (Last, First, Middle Initial) Wells Fargo	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 350 N. Last Chance Gulch	Transaction ID: C17953361
	City Helena State MT Zip Code 59601	Amount of Each Receipt this Period 232.95
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5302.95	
SUBTOTAL of Receipts This Page (optional)		1229.58
TOTAL This Period (last page this line number only)		2048.69

**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 58 / 110

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) ALPS Corporation		Transaction ID: D366987 Date of Disbursement 03 / 31 / 2009	
Mailing Address		Attn: Kathy Dahood PO Box 9169		Amount of Each Disbursement this Period -250.00	
City Missoula		State MT		Zip Code 59807	
Purpose of Disbursement VOIDED CHECK PRIOR PERIOD				<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:			
B.		Full Name (Last, First, Middle Initial) American Express		Transaction ID: D367367 Date of Disbursement 03 / 31 / 2009	
Mailing Address		Suite 0002		Amount of Each Disbursement this Period 81.25	
City Chicago		State IL		Zip Code 60679-0002	
Purpose of Disbursement Credit Card Fee				<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:			
C.		Full Name (Last, First, Middle Initial) Ashmead Group		Transaction ID: D365199 Date of Disbursement 02 / 25 / 2009	
Mailing Address		223 Massachusetts Avenue, NE 2nd F		Amount of Each Disbursement this Period 2100.00	
City Washington		State DC		Zip Code 20002	
Purpose of Disbursement Fundraising consultant				<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:			
SUBTOTAL of Disbursements This Page (optional)				1931.25	
TOTAL This Period (last page this line number only)					

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153522

**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 59 / 110

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Ashmead Group</p> <p>Mailing Address 223 Massachusetts Avenue, NE 2nd F</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358530</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 3150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Ashmead Group</p> <p>Mailing Address 223 Massachusetts Avenue, NE 2nd F</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358531</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 2100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 650782</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367371</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 29.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BlueCross BlueShield of Montana</p> <p>Mailing Address 404 Fuller Avenue PO Box 8006</p> <p>City Helena State MT Zip Code 59604</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365198</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1195.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City Purchase State NY Zip Code 10577</p> <p>Purpose of Disbursement VOIDED CHECK PRIOR PERIOD</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D366994</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period -139.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bresnan Communications</p> <p>Mailing Address One Manhattanville Road</p> <p>City Purchase State NY Zip Code 10577</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367341</p> <p>Date of Disbursement MM / DD / YYYY 03 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 141.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153524

**Use separate schedule(s)
for each category of the
Detailed Summary Page**

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Friends of Max Baucus

MM / DD / YYYY

308.12

Category/
Type

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

MM / DD / YYYY
02 / 16 / 2009

69.95

Category/
Type

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

MM / DD / YYYY
02 / 16 / 2009

69.60

Category/
Type

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

447.67

FEC Schedule B (Form 3) (Revised 02/2003)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Benjamin Brewer	Transaction ID: D366986 Date of Disbursement
Mailing Address 218 E. Front Street Suite 200	<div> <div>MM/DD/YYYY</div> <div>03/31/2009</div> </div>
City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period <div>-789.97</div>
Purpose of Disbursement VOIDED CHECK PRIOR PERIOD Candidate Name <div>Category/Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: D367338 Date of Disbursement
Mailing Address 3242 Cummins Way	<div> <div>MM/DD/YYYY</div> <div>03/06/2009</div> </div>
City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period <div>1225.00</div>
Purpose of Disbursement Accounting fee Candidate Name <div>Category/Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: D367339 Date of Disbursement
Mailing Address 3242 Cummins Way	<div> <div>MM/DD/YYYY</div> <div>03/06/2009</div> </div>
City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period <div>13.86</div>
Purpose of Disbursement Postage Candidate Name <div>Category/Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<div>448.89</div>
TOTAL This Period (last page this line number only)	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153526

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Campaign Compliance, LLC</p> <p>Mailing Address 3242 Cummins Way</p> <p>City Missoula State MT Zip Code 59802</p> <p>Purpose of Disbursement Accounting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365177</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1225.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Campaign Compliance, LLC</p> <p>Mailing Address 3242 Cummins Way</p> <p>City Missoula State MT Zip Code 59802</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365178</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 36.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Campaign Compliance, LLC</p> <p>Mailing Address 3242 Cummins Way</p> <p>City Missoula State MT Zip Code 59802</p> <p>Purpose of Disbursement Accounting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358523</p> <p>Date of Disbursement MM / DD / YYYY 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1272.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

2533.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Ms. Alexandra Catherine Corcoran		Transaction ID: D366998 Date of Disbursement 03 / 31 / 2009	
Mailing Address 1915 Missoula Ave.		Amount of Each Disbursement this Period -19.80	
City Missoula	State MT	Zip Code 59802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement VOIDED CHECK PRIOR PERIOD		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) Corental Property Management Inc.		Transaction ID: D363921 Date of Disbursement 02 / 17 / 2009	
Mailing Address 435 South Main Street PO Box 1894		Amount of Each Disbursement this Period -1000.00	
City Kalispell	State MT	Zip Code 59903	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement voided check prior period		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Democratic Conf. Luncheon Fund		Transaction ID: D358526 Date of Disbursement 01 / 28 / 2009	
Mailing Address S-309 U. S. Capitol		Amount of Each Disbursement this Period 500.00	
City Washington	State DC	Zip Code 20510	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Catering/Meals		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

-519.80

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Diversified Communications</p> <p>Mailing Address 200 M Street, NW Suite 340</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Satellite Feed</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367340</p> <p>Date of Disbursement 03 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 270.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Exec Air Montana, Inc.</p> <p>Mailing Address 2560 Airport Road</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365197</p> <p>Date of Disbursement 02 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4819.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Exec Air Montana, Inc.</p> <p>Mailing Address 2560 Airport Road</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365189</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 2463.61</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 7553.33</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

20020153520

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365181</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 131.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358515</p> <p>Date of Disbursement MM / DD / YYYY 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 352.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367336</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 46.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

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FEC Schedule B (Form 3) (Revised 02/2003)

29020153530

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367355

Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

33.81

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Maura Hagerty

Mailing Address 223 Massachusetts Avenue, NE 2nd F

City Washington State DC Zip Code 20002

Purpose of Disbursement
Petty Cash

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365204

Date of Disbursement

02 / 27 / 2009

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Maura Hagerty

Mailing Address 223 Massachusetts Avenue, NE 2nd F

City Washington State DC Zip Code 20002

Purpose of Disbursement
Petty Cash

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358502

Date of Disbursement

01 / 08 / 2009

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

233.81

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Maura Hagerty		Transaction ID: D367363 Date of Disbursement MM / DD / YYYY 03 / 31 / 2009							
Mailing Address		223 Massachusetts Avenue, NE 2nd F		Amount of Each Disbursement this Period 100.00							
City		Washington		State		DC		Zip Code		20002	
Purpose of Disbursement		Petty Cash		Category/Type				Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		<input type="checkbox"/>	
Candidate Name				Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For:		2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:		District:									
B.		Full Name (Last, First, Middle Initial) Maura Hagerty		Transaction ID: D367364 Date of Disbursement MM / DD / YYYY 03 / 31 / 2009							
Mailing Address		223 Massachusetts Avenue, NE 2nd F		Amount of Each Disbursement this Period 100.00							
City		Washington		State		DC		Zip Code		20002	
Purpose of Disbursement		Petty Cash		Category/Type				Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		<input type="checkbox"/>	
Candidate Name				Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For:		2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:		District:									
C.		Full Name (Last, First, Middle Initial) Maura Hagerty		Transaction ID: D367365 Date of Disbursement MM / DD / YYYY 03 / 31 / 2009							
Mailing Address		223 Massachusetts Avenue, NE 2nd F		Amount of Each Disbursement this Period 50.00							
City		Washington		State		DC		Zip Code		20002	
Purpose of Disbursement		Petty Cash		Category/Type				Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		<input type="checkbox"/>	
Candidate Name				Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For:		2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:		District:									
SUBTOTAL of Disbursements This Page (optional)				250.00							
TOTAL This Period (last page this line number only)											

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153532

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Joe Ragans Coffee</p> <p>Mailing Address PO Box 125</p> <p>City Springfield State VA Zip Code 22150</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358499</p> <p>Date of Disbursement MM / DD / YYYY 01 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 155.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Joe Ragans Coffee</p> <p>Mailing Address PO Box 125</p> <p>City Springfield State VA Zip Code 22150</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367351</p> <p>Date of Disbursement MM / DD / YYYY 03 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 56.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Joe Ragans Coffee</p> <p>Mailing Address PO Box 125</p> <p>City Springfield State VA Zip Code 22150</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367352</p> <p>Date of Disbursement MM / DD / YYYY 03 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 286.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153533

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

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

Barrett Kaiser

Mailing Address 3206 6th Ave. North

City State Zip Code
Billings MT 59101

Purpose of Disbursement
VOIDED CHECK PRIOR PERIOD

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D366996

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

-120.82

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Elizabeth Kelley

Mailing Address 233 11th Street, SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D365165

Date of Disbursement

02 / 02 / 2009

Amount of Each Disbursement this Period

1855.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Kelly Press

Mailing Address 1701 Cabin Branch Drive

City State Zip Code
Cheverly MD 20785

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D358525

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

5287.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7021.95

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

Use separate schedule(s)
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Detailed Summary Page

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Friends of Max Baucus

740.78

State: District:

02 / 16 / 2009

1727 38

State: District:

02 / 18 / 2009

0101

State: District:

2532.20

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20020111Z

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lexis Nexis</p> <p>Mailing Address PO Box 2314</p> <p>City Carol Stream State IL Zip Code 60132-2314</p> <p>Purpose of Disbursement Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367356</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 64.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lockwood Mini-Storage</p> <p>Mailing Address 1852 Old Hardin Road</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367357</p> <p>Date of Disbursement 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 95.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lockwood Mini-Storage</p> <p>Mailing Address 1852 Old Hardin Road</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365193</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 261.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153536

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)
Montana Department of Revenue

Mailing Address PO Box 6309

City Helena State MT Zip Code 59604-6309

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D367344

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

8190.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 5039 Connecticut Ave., NW
Suite 1A

City Washington State DC Zip Code 20008-2056

Purpose of Disbursement
Technology Support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D358529

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1575.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Northwestern Energy

Mailing Address 40 E. Broadway St.

City Butte State MT Zip Code 59701-9394

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D365169

Date of Disbursement

02 / 11 / 2009

Amount of Each Disbursement this Period

181.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9946.32

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Northwestern Energy</p> <p>Mailing Address 40 E. Broadway St.</p> <p>City Butte State MT Zip Code 59701-9394</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365194</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 213.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ms. Kimberly Diane Pappas</p> <p>Mailing Address 310 1/2 Benton</p> <p>City Missoula State MT Zip Code 59801</p> <p>Purpose of Disbursement VOIDED CHECK PRIOR PERIOD</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D366990</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period -76.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ms. Kimberly Diane Pappas</p> <p>Mailing Address 310 1/2 Benton</p> <p>City Missoula State MT Zip Code 59801</p> <p>Purpose of Disbursement VOIDED CHECK PRIOR PERIOD</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D366991</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period -40.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365200</p> <p>Date of Disbursement MM / DD / YYYY 02 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 501.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367342</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 123.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367359</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 851.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

1476.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367346</p> <p>Date of Disbursement MM / DD / YYYY 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 472.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365167</p> <p>Date of Disbursement MM / DD / YYYY 02 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 490.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358553</p> <p>Date of Disbursement MM / DD / YYYY 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 34.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

997.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D365173 Date of Disbursement MM / DD / YYYY 02 / 13 / 2009	
Mailing Address 3060 Williams Drive Suite 300		Amount of Each Disbursement this Period 1615.99	
City Fairfax	State VA	Zip Code 22031	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D358506 Date of Disbursement MM / DD / YYYY 01 / 12 / 2009	
Mailing Address 3060 Williams Drive Suite 300		Amount of Each Disbursement this Period 164.23	
City Fairfax	State VA	Zip Code 22031	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll Processing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D358512 Date of Disbursement MM / DD / YYYY 01 / 13 / 2009	
Mailing Address 3060 Williams Drive Suite 300		Amount of Each Disbursement this Period 150.36	
City Fairfax	State VA	Zip Code 22031	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

1930.58

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue, 40th FL</p> <p>City Seattle State WA Zip Code 98101-3099</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358513 Date of Disbursement MM / DD / YYYY 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 496.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue, 40th FL</p> <p>City Seattle State WA Zip Code 98101-3099</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367353 Date of Disbursement MM / DD / YYYY 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 302.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue, 40th FL</p> <p>City Seattle State WA Zip Code 98101-3099</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365183 Date of Disbursement MM / DD / YYYY 02 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 96.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153542

**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)

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Premiere Global Services</p> <p>Mailing Address PO Box 404351</p> <p>City Atlanta State GA Zip Code 30384-4351</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358524</p> <p>Date of Disbursement MM / DD / YYYY 01 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 157.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Premiere Global Services</p> <p>Mailing Address PO Box 404351</p> <p>City Atlanta State GA Zip Code 30384-4351</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367350</p> <p>Date of Disbursement MM / DD / YYYY 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 134.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City Bismarck State ND Zip Code 58506-5508</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358517</p> <p>Date of Disbursement MM / DD / YYYY 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 17.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153543

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City Bismarck State ND Zip Code 58506-5508</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358518</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 125.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City Bismarck State ND Zip Code 58506-5508</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358519</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 72.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City Bismarck State ND Zip Code 58506-5508</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365182</p> <p>Date of Disbursement 02 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 60.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 258.98</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address Box 5508</p> <p>City Bismarck State ND Zip Code 58506-5508</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365192</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 6.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Stockton Inc.</p> <p>Mailing Address 7940 Cessna Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-4125</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358507</p> <p>Date of Disbursement 01 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 2160.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358509</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 48.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 2215.60</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358510</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 6.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358511</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D365170</p> <p>Date of Disbursement 02 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 38.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 46.90</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153546

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Suntrust		Transaction ID: D365171 Date of Disbursement 02 / 11 / 2009	
Mailing Address		P.O. Box 27572		Amount of Each Disbursement this Period 16.45	
City Richmond		State VA		Zip Code 23261	
Purpose of Disbursement Credit Card Fee		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
B.		Full Name (Last, First, Middle Initial) Suntrust		Transaction ID: D365172 Date of Disbursement 02 / 11 / 2009	
Mailing Address		P.O. Box 27572		Amount of Each Disbursement this Period 0.01	
City Richmond		State VA		Zip Code 23261	
Purpose of Disbursement Credit Card Fee		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
C.		Full Name (Last, First, Middle Initial) Suntrust		Transaction ID: D367368 Date of Disbursement 03 / 31 / 2009	
Mailing Address		P.O. Box 27572		Amount of Each Disbursement this Period 33.01	
City Richmond		State VA		Zip Code 23261	
Purpose of Disbursement Credit Card Fee		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
SUBTOTAL of Disbursements This Page (optional)				49.47	
TOTAL This Period (last page this line number only)					

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367369</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 22.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367370</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) John R. Tooke</p> <p>Mailing Address PO box 1134</p> <p>City Miles City State MT Zip Code 59301</p> <p>Purpose of Disbursement Accounting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367343</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 973.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

997.81

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial)
Transcend Marketing & Events, LLC

Mailing Address 3235 East Roma Avenue

City Phoenix State AZ Zip Code 85018

Purpose of Disbursement
Fundraising consultant

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367337

Date of Disbursement

03 / 03 / 2009

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Transcend Marketing & Events, LLC

Mailing Address 3235 East Roma Avenue

City Phoenix State AZ Zip Code 85018

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365205

Date of Disbursement

02 / 27 / 2009

Amount of Each Disbursement this Period

742.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address 841 S. 26th ST.

City Billings State MT Zip Code 59101

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365168

Date of Disbursement

02 / 10 / 2009

Amount of Each Disbursement this Period

70.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2312.62

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 841 S. 26th ST.</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358522</p> <p>Date of Disbursement MM / DD / YYYY 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 841 S. 26th ST.</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358528</p> <p>Date of Disbursement MM / DD / YYYY 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 126.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 78434</p> <p>City Phoenix State AZ Zip Code 85062-8434</p> <p>Purpose of Disbursement Cellular Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358514</p> <p>Date of Disbursement MM / DD / YYYY 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 78.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153550

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 78434</p> <p>City Phoenix State AZ Zip Code 85062-8434</p> <p>Purpose of Disbursement Cellular Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365180</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 39.32</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 78434</p> <p>City Phoenix State AZ Zip Code 85062-8434</p> <p>Purpose of Disbursement Cellular Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367334</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1192.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 78434</p> <p>City Phoenix State AZ Zip Code 85062-8434</p> <p>Purpose of Disbursement Cellular Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D367354</p> <p>Date of Disbursement MM / DD / YYYY 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 55.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153551

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D367358 Date of Disbursement
Mailing Address P.O. Box 78434	<div> <div>MM/DD/YYYY</div> <div>03/27/2009</div> </div>
City Phoenix State AZ Zip Code 85062-8434	Amount of Each Disbursement this Period
Purpose of Disbursement Cellular Telephone	<div> <div>Amount</div> <div>1015.16</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D367335 Date of Disbursement
Mailing Address P.O. Box 646	<div> <div>MM/DD/YYYY</div> <div>03/02/2009</div> </div>
City Baltimore State MD Zip Code 21265-0001	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div>Amount</div> <div>100.87</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D365190 Date of Disbursement
Mailing Address P.O. Box 646	<div> <div>MM/DD/YYYY</div> <div>02/18/2009</div> </div>
City Baltimore State MD Zip Code 21265-0001	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div>Amount</div> <div>113.55</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div> <div>Amount</div> <div>1229.58</div> </div>
TOTAL This Period (last page this line number only)	<div> <div>Amount</div> <div></div> </div>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 646</p> <p>City Baltimore State MD Zip Code 21265-0001</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358503</p> <p>Date of Disbursement MM / DD / YYYY 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 37.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 350 N. Last Chance Gulch</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358500</p> <p>Date of Disbursement MM / DD / YYYY 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 350 N. Last Chance Gulch</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358520</p> <p>Date of Disbursement MM / DD / YYYY 01 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 10.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153553

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 350 N. Last Chance Gulch

City Helena State MT Zip Code 59601

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358521

Date of Disbursement

01 / 20 / 2009

Amount of Each Disbursement this Period

704.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 350 N. Last Chance Gulch

City Helena State MT Zip Code 59601

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365179

Date of Disbursement

02 / 13 / 2009

Amount of Each Disbursement this Period

21.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 350 N. Last Chance Gulch

City Helena State MT Zip Code 59601

Purpose of Disbursement

Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367345

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

34800.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

35525.59

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Wells Fargo		Transaction ID: D367372 Date of Disbursement 03 / 31 / 2009	
Mailing Address		350 N. Last Chance Gulch		Amount of Each Disbursement this Period 22.96	
City Helena		State MT		Zip Code 59601	
Purpose of Disbursement Bank fee		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
B.		Full Name (Last, First, Middle Initial) James Zadick		Transaction ID: D366995 Date of Disbursement 03 / 31 / 2009	
Mailing Address		218 E. Front Street Suite 200		Amount of Each Disbursement this Period -40.00	
City Missoula		State MT		Zip Code 59802	
Purpose of Disbursement VOIDED CHECK PRIOR PERIOD		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
C.		Full Name (Last, First, Middle Initial) American Express		Transaction ID: D358532 Date of Disbursement 01 / 29 / 2009	
Mailing Address		Suite 0002		Amount of Each Disbursement this Period 18160.21	
City Chicago		State IL		Zip Code 60679-0002	
Purpose of Disbursement Credit card payment-various		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
SUBTOTAL of Disbursements This Page (optional)				18143.17	
TOTAL This Period (last page this line number only)					

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address Suite 0002</p> <p>City Chicago State IL Zip Code 60679-0002</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358535</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 12.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bistro Bis</p> <p>Mailing Address 2401 M Street, NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358538</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 225.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Carroll Travel</p> <p>Mailing Address 201 Massachusetts Ave., NE</p> <p>City Washington State DC Zip Code 20002-4957</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358544</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 12.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153556

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Carroll Travel</p> <p>Mailing Address 201 Massachusetts Ave., NE</p> <p>City Washington State DC Zip Code 20002-4957</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358545</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 12.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Carroll Travel</p> <p>Mailing Address 201 Massachusetts Ave., NE</p> <p>City Washington State DC Zip Code 20002-4957</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358546</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 6.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Catering by Windows</p> <p>Mailing Address 1125 North Royal Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358542</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 5356.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

20020153557

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 3220 Northern Pacific Ave.</p> <p>City Missoula State MT Zip Code 59808</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358551</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 57.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358547</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jordan's Grille</p> <p>Mailing Address 523 8th St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D358541</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1598.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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FEC Schedule B (Form 3) (Revised 02/2003)

29020153558

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Montana Coffee Traders		Transaction ID: D358536 Date of Disbursement MM / DD / YYYY 01 / 29 / 2009	
Mailing Address		5810 Highway 93 South		Amount of Each Disbursement this Period 271.12	
City Whitefish		State MT		Zip Code 59437	
Purpose of Disbursement Catering/Meals		Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]	
State: District:					
B.		Full Name (Last, First, Middle Initial) Montana Coffee Traders		Transaction ID: D358537 Date of Disbursement MM / DD / YYYY 01 / 29 / 2009	
Mailing Address		5810 Highway 93 South		Amount of Each Disbursement this Period 216.68	
City Whitefish		State MT		Zip Code 59437	
Purpose of Disbursement Catering/Meals		Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]	
State: District:					
C.		Full Name (Last, First, Middle Initial) Northwest Airlines		Transaction ID: D358543 Date of Disbursement MM / DD / YYYY 01 / 29 / 2009	
Mailing Address		5101 Northwest Drive		Amount of Each Disbursement this Period 351.84	
City St. Paul		State MN		Zip Code 55111	
Purpose of Disbursement Airfare		Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]	
State: District:					
SUBTOTAL of Disbursements This Page (optional)				0.00	
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 1250 H Street, NW

City
Washington

State
DC

Zip Code
20005-3952

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358549

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

31.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Stockton Inc.

Mailing Address 7940 Cessna Avenue

City
Gaithersburg

State
MD

Zip Code
20879-4125

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358533

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

9204.42

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

U.S. Postal Service

Mailing Address 841 S. 26th ST.

City
Billings

State
MT

Zip Code
59101

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358548

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

63.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

U.S. Postal Service

Mailing Address 841 S. 26th ST.

City Billings State MT Zip Code 59101

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358552

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

20.15

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address P.O. Box 78434

City Phoenix State AZ Zip Code 85062-8434

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358534

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

638.48

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 3060 Williams Drive
Suite 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358554

Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

158.61

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

158.61

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

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Melanie Brock

Mailing Address 115 Arrowhead Drive

City Missoula State MT Zip Code 59803

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358555

Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

158.61

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 3060 Williams Drive
Suite 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365174

Date of Disbursement

02 / 13 / 2009

Amount of Each Disbursement this Period

1092.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Melanie Brock

Mailing Address 115 Arrowhead Drive

City Missoula State MT Zip Code 59803

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365175

Date of Disbursement

02 / 13 / 2009

Amount of Each Disbursement this Period

158.61

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1092.65

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Elizabeth Kelley		Transaction ID: D365176 Date of Disbursement MM / DD / YYYY 02 / 13 / 2009	
Mailing Address 233 11th Street, SE		Amount of Each Disbursement this Period 934.04	
City Washington State DC Zip Code 20003	Purpose of Disbursement Salary Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D365201 Date of Disbursement MM / DD / YYYY 02 / 27 / 2009	
Mailing Address 3060 Williams Drive Suite 300		Amount of Each Disbursement this Period 1092.65	
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Melanie Brock		Transaction ID: D365202 Date of Disbursement MM / DD / YYYY 02 / 27 / 2009	
Mailing Address 115 Arrowhead Drive		Amount of Each Disbursement this Period 158.61	
City Missoula State MT Zip Code 59803	Purpose of Disbursement Salary Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	1092.65
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial) Elizabeth Kelley	Transaction ID: D365203 Date of Disbursement 02 / 27 / 2009
Mailing Address 233 11th Street, SE	
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 934.04
Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D367305 Date of Disbursement 03 / 02 / 2009
Mailing Address Suite 0002	
City Chicago State IL Zip Code 60679-0002	Amount of Each Disbursement this Period 9635.24
Purpose of Disbursement Credit card payment-various Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Ali's Pizza	Transaction ID: D367333 Date of Disbursement 03 / 02 / 2009
Mailing Address 1382 E. Capitol Street, NE	
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 450.30
Purpose of Disbursement Catering/Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)	9635.24
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Best Western Helena</p> <p>Mailing Address 835 Great Northern Blvd.</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367322</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 138.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Bitter Root Brewing</p> <p>Mailing Address 101 Marcus St.</p> <p>City Hamilton State MT Zip Code 59840</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367324</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 93.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Carroll Travel</p> <p>Mailing Address 201 Massachusetts Ave., NE</p> <p>City Washington State DC Zip Code 20002-4957</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367316</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
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FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153565

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 3220 Northern Pacific Ave.</p> <p>City Missoula State MT Zip Code 59808</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367318</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 36.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 3220 Northern Pacific Ave.</p> <p>City Missoula State MT Zip Code 59808</p> <p>Purpose of Disbursement Ground transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367319</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 26.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 3220 Northern Pacific Ave.</p> <p>City Missoula State MT Zip Code 59808</p> <p>Purpose of Disbursement Ground transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367329</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 223.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153566

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Delta

Mailing Address Washington National Airport

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367313

Date of Disbursement

03 / 02 / 2009

Amount of Each Disbursement this Period

159.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367315

Date of Disbursement

03 / 02 / 2009

Amount of Each Disbursement this Period

1.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HP Shopping.com

Mailing Address 3000 Hanover ST.

City Palo Alto State CA Zip Code 94304-1185

Purpose of Disbursement
Computer support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D367332

Date of Disbursement

03 / 02 / 2009

Amount of Each Disbursement this Period

2014.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jake's Restaurant</p> <p>Mailing Address 2701 1st Ave</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367331</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Montana Coffee Traders</p> <p>Mailing Address 5810 Highway 93 South</p> <p>City Whitefish State MT Zip Code 59437</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367308</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 170.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) National Rental Car</p> <p>Mailing Address 1795 Perimeter Road</p> <p>City Dania State FL Zip Code 33004</p> <p>Purpose of Disbursement Ground transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367330</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 56.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) Oceanaire</p> <p>Mailing Address 1201 F Street NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Catering/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367310</p> <p>Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 4211.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Profax, Inc.</p> <p>Mailing Address 20 Max Avenue</p> <p>City Hicksville State NY Zip Code 11801-1419</p> <p>Purpose of Disbursement Fax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367312</p> <p>Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 215.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1250 H Street, NW</p> <p>City Washington State DC Zip Code 20005-3952</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367325</p> <p>Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 49.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020153569

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)

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

<p>A. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 841 S. 26th ST.</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367326</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 95.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 841 S. 26th ST.</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367327</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 841 S. 26th ST.</p> <p>City Billings State MT Zip Code 59101</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D367314</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 76.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153570

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.		Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: D367306 Date of Disbursement 03 / 02 / 2009	
Mailing Address		P.O. Box 78434		Amount of Each Disbursement this Period 831.72	
City Phoenix		State AZ		Zip Code 85062-8434	
Purpose of Disbursement Telephone		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
State: District:					
B.		Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D367347 Date of Disbursement 03 / 13 / 2009	
Mailing Address		3060 Williams Drive Suite 300		Amount of Each Disbursement this Period 1112.87	
City Fairfax		State VA		Zip Code 22031	
Purpose of Disbursement Payroll		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
C.		Full Name (Last, First, Middle Initial) Melanie Brock		Transaction ID: D367348 Date of Disbursement 03 / 13 / 2009	
Mailing Address		115 Arrowhead Drive		Amount of Each Disbursement this Period 158.61	
City Missoula		State MT		Zip Code 59803	
Purpose of Disbursement Salary		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
State: District:					
SUBTOTAL of Disbursements This Page (optional)				1112.87	
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

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A. Full Name (Last, First, Middle Initial)
Elizabeth Kelley

Mailing Address 233 11th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D367349

Date of Disbursement

03 / 13 / 2009

Amount of Each Disbursement this Period

954.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 3060 Williams Drive
Suite 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D367360

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

1112.87

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Melanie Brock

Mailing Address 115 Arrowhead Drive

City Missoula State MT Zip Code 59803

Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D367361

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

158.61

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1112.87

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
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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

A.

Full Name (Last, First, Middle Initial)

Elizabeth Kelley

Mailing Address 233 11th Street, SE

City

Washington

State

DC

Zip Code

20003

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2014

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: D367362

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Amount of Each Disbursement this Period

954.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

122862.97

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020153573

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)

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NAME OF COMMITTEE (In Full)

Friends of Max Baucus

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

Mailing Address 430 South Capitol Street S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement
Transfer of excessive campaign funds

Candidate Name
Democratic Senatorial Campaign Committee

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358504

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2009

Amount of Each Disbursement this Period

85000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Montana Food Bank Network

Mailing Address 5625 Expressway

City Missoula State MT Zip Code 59808

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D365196

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2009

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

86000.00

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

86000.00

United States Senate

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OFFICE OF PUBLIC RECORDS

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NEXT BUSINESS DAY DELIVERY

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Date of Receipt

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Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

04-15-09

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