

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 203 OF 245	
<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)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) WALL, KATHALEEN, , ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2017	
Mailing Address PO BOX 667			Transaction ID : SA11A.1725	
City HOUSTON	State TX	Zip Code 77001-0667	Amount of Each Receipt this Period - 2300.00	
FEC ID number of contributing federal political committee. C		REDESIGNATION TO GENERAL		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 5000.00		
			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	

Full Name (Last, First, Middle Initial) WALL, KATHALEEN, , ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2017	
Mailing Address PO BOX 667			Transaction ID : SA11A.1726	
City HOUSTON	State TX	Zip Code 77001-0667	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		REDESIGNATION FROM PRIMARY		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 5000.00		
			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	

Full Name (Last, First, Middle Initial) ZIMMERMAN, FORREST, , ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2017	
Mailing Address PO BOX 857			Transaction ID : SA11A.1589	
City HELENA	State MT	Zip Code 59624-0857	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 300.00		
			<input type="checkbox"/> Memo Item	

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

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

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