

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

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

FOR LINE NUMBER: PAGE 893 OF 2136

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. COLE, DARRELL, H., MR.,

Mailing Address 2319 EDMONT AVE.

City

BRISTOL

State

TN

Zip Code

37620-4756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE UNITED DISTRIBUTION GRP., INC.

Occupation

C.E.O.

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		12		2018

Transaction ID : SA11A.12333

Amount of Each Receipt this Period

- 2000.00

☒ Memo Item

CONTRIBUTION

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

B. COLE, JUDY, D., MRS.,

Mailing Address 2319 EDMONT AVE.

City

BRISTOL

State

TN

Zip Code

37620-4756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RENAISSANCE SURGERY CENTER

Occupation

MANAGER

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		12		2018

Transaction ID : SA11A.12321

Amount of Each Receipt this Period

2000.00

☒ Memo Item

CONTRIBUTION

REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

C. COX, BOBBY, , MR.,

Mailing Address 5000 OVERTON PLAZA, SUITE 300

City

FORT WORTH

State

TX

Zip Code

76109-4441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RESTAURANTS &amp; INVESTMENTS

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		12		2018

Transaction ID : SA11A.12334

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

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

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

2500.00
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