

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Monica Tranel for Montana				
ADDRESS (number and street) PO Box 9384				
CITY Missoula		STATE MT	ZIP CODE 59807	
2. NAME OF CANDIDATE Tranel, Monica, , ,		3. OFFICE SOUGHT (State and District) House MT 00		4. FEC IDENTIFICATION NUMBER C00783696
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME Adams, Barrett, , ,		Name of Employer Community Hospital Of Anaconda		Date (month, day, year) 10/28/2022
MAILING ADDRESS 280 Brass Lantern Ct		Transaction ID : 14363611		Amount 1000.00
CITY Bozeman	STATE MT	ZIP CODE 59715-8481	Occupation Physician	
B. FULL NAME Bills, Michael, D., ,		Name of Employer Bluestream Asset Management		Date (month, day, year) 10/29/2022
MAILING ADDRESS 815 Broomley Rd		Transaction ID : 14406750		Amount 2900.00
CITY Charlottesville	STATE VA	ZIP CODE 22901-7821	Occupation President	
C. FULL NAME Craighead, Sophie, , ,		Name of Employer Not Employed		Date (month, day, year) 10/28/2022
MAILING ADDRESS 5880 Highlands Drive 5880 Highland		Transaction ID : 14363642		Amount 1000.00
CITY Kelly	STATE WY	ZIP CODE 83011	Occupation Not Employed	
D. FULL NAME EVERGREEN PAC		Name of Employer		Date (month, day, year) 10/29/2022
MAILING ADDRESS 499 S Capitol St SW Ste 420		Transaction ID : 14406743		Amount 2000.00
CITY Washington	STATE DC	ZIP CODE 20003-4027	Occupation	
E. FULL NAME Fisher, Cynthia, , ,		Name of Employer		Date (month, day, year) 10/29/2022
MAILING ADDRESS 651 Bobcat Ln		Transaction ID : 14406727		Amount 1000.00
CITY Hamilton	STATE MT	ZIP CODE 59840-9515	Occupation	
SIGNATURE (optional) Giarraputo, Holly, , , [Electronically Filed]			DATE 10/30/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6

(Revised 03/2016)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Gibson, Matt, , , 421 Woodworth Ave Missoula MT 59801-6046	Not Employed Transaction ID : 14363655 Occupation Not Employed	10/28/2022	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Gillam, Daphne, , , PO Box 937 Bozeman MT 59771-0937	Name of Employer Not Employed Transaction ID : 14406748 Occupation Not Employed	Date (month, day, year) 10/29/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Heppel, C Scott, , , 6530 Oak Estates Dr Memphis TN 38119-6608	Name of Employer Not Employed Transaction ID : 14363122 Occupation Not Employed	Date (month, day, year) 10/28/2022	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Homebase Management LLC 111 W Lamme St Ste 101 Bozeman MT 59715-3600	Name of Employer Not Employed Transaction ID : 14359120 Occupation Not Employed	Date (month, day, year) 10/28/2022	Amount 2900.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE LEAGUE OF CONSERVATION VOTERS ACTION FUND 740 15Th St NW FI 7 Washington DC 20005-1048	Name of Employer Not Employed Transaction ID : 14358157 Occupation Not Employed	Date (month, day, year) 10/28/2022	Amount 1000.00

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Wishcamper, Rika, , , 605 Strawberry Ridge Way Missoula MT 59802-3072			
Name of Employer Not Employed		Date (month, day, year) 10/28/2022	
Amount 1000.00		Transaction ID : 14363338 Occupation Not Employed	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Wood, Margaret, , , 3330 Sundance Dr Bozeman MT 59715-9265			
Name of Employer Not Employed		Date (month, day, year) 10/28/2022	
Amount 1000.00		Transaction ID : 14363290 Occupation Not Employed	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE 			
Name of Employer 		Date (month, day, year) 	
Amount 		Occupation 	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE 			
Name of Employer 		Date (month, day, year) 	
Amount 		Occupation 	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE 			
Name of Employer 		Date (month, day, year) 	
Amount 		Occupation 	