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NAME OF COMMITTEE (In Full)
Schweitzer for US Senate

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Reber 4143 Via Marina #720 Marina Del Rey, CA 90292-	Estate Planning & Trust Occupation Attorney	10/01/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
B. Full Name, Mailing Address and Zip Code Jill Slater 15 W. 72nd St. #373 New York, NY 10023-	Name of Employer Self Occupation Attorney	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code Tim McInnis 321 Meagher Ave. Bozeman, MT 59713-	Name of Employer Self Occupation Physician	Date (month, day, year) 10/05/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	400.00	
D. Full Name, Mailing Address and Zip Code Elspeth Bobbe 630 E. Alameda Santa Fe, NM 87501-	Name of Employer Self Occupation Property Manager	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	400.00	
E. Full Name, Mailing Address and Zip Code Deborah Anspach 4608 Palisades Park Billings, MT 59106-	Name of Employer MT Legal Services Assoc. Occupation Attorney	Date (month, day, year) 10/14/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	600.00	
F. Full Name, Mailing Address and Zip Code Carolyn Walker 411 Woodworth Ave. Missoula, MT 59801-	Name of Employer Self Occupation Artist	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	450.00	
G. Full Name, Mailing Address and Zip Code Gregory Craig 3155 Highland Place NW Washington, DC 20008-3235	Name of Employer Williams and Connolly, LLP Occupation Attorney	Date (month, day, year) 10/01/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	2,250.00
TOTAL This Period (last page this line number only)	