

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Rob Quist for Montana

Full Name (Last, First, Middle Initial)

Deschamps, Rebecca, H., ,

Mailing Address 4505 Old Marshall Grade Rd

City

Missoula

State

MT

Zip Code

59802-9634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Community Medial Center

Occupation

Staff Pharmacist

Receipt For: 2017

☐ Primary☐ General☒ Other (specify) ▼

Special General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2017

Transaction ID : VTECCFDN4F5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Deschamps, Rebecca, H., ,

Mailing Address 4505 Old Marshall Grade Rd

City

Missoula

State

MT

Zip Code

59802-9634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Community Medial Center

Occupation

Staff Pharmacist

Receipt For: 2017

☐ Primary☐ General☒ Other (specify) ▼

Special General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2017

Transaction ID : VTECCFV38V6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Devine, Kevin, , ,

Mailing Address 3015 4Th Ave N

City

Great Falls

State

MT

Zip Code

59401-2915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2017

☐ Primary☐ General☒ Other (specify) ▼

Special General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2017

Transaction ID : VTECCDT6KY8

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

1250.00

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