

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR 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
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)
Montanans for Tester

A. Full Name (Last, First, Middle Initial)
Spear, Randy, , ,

Mailing Address 2838 Dozer Rd

City Billings	State MT	Zip Code 59101-9488
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FEC ID number of contributing federal political committee. **C**

Name of Employer Billings Clinic	Occupation Physician Assistant
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Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date **275.00**

Date of Receipt

MM / DD / YYYY
06 / 30 / 2017

Transaction ID : VR05HM222H4

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date **381131.85**

Date of Receipt

MM / DD / YYYY
06 / 30 / 2017

Transaction ID : VR05HM222H4E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Speckart, Stephen, F., ,

Mailing Address 820 Ronald Ave

City Missoula	State MT	Zip Code 59801-4329
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Physician
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Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date **250.00**

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : VR05HKS4R86

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

275.00

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