

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Massachusetts Republican State Congressional Committee

ADDRESS (number and street) 85 Merrimac Street, Suite 400
 Check if different than previously reported. (ACC)
Boston MA 02114

2. **FEC IDENTIFICATION NUMBER** C00042622
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 12 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brent Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 01 22 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		11950.90
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	11422.11									
(c) Total Receipts (from Line 19)	35123.19	576216.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46545.30	588167.45								
7. Total Disbursements (from Line 31)	29415.02	571537.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17130.28	16630.28								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	29300.00	415950.00
(i) Itemized (use Schedule A)	5643.00	114270.17
(ii) Unitemized	34943.00	530220.17
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	50.00	39401.73
(c) Other Political Committees (such as PACs)	34993.00	569621.90
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	130.19	4344.43
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	2250.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35123.19	576216.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35123.19	576216.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	21797.00	385034.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	21797.00	385034.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	35746.73
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	7618.02	150755.65
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	7618.02	150755.65
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29415.02	571537.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29415.02	571537.17

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	34993.00	569621.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34993.00	569621.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21797.00	385034.79
37. Offsets to Operating Expenditures (from Line 15, page 3)	130.19	4344.43
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21666.81	380690.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Elisabeth Allison		Date of Receipt
	Mailing Address 69 Pinehurst Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 8 / 2 0 0 7
	City Belmont	State MA	Zip Code 02478
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166701
	Amount of Each Receipt this Period		<input type="text"/> 500.00
Name of Employer Anzi Ltd.		Occupation Publishing Consultant	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) Thomas Breuer		Date of Receipt
	Mailing Address 9 Plymouth Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 0 7 / 2 0 0 7
	City Winchester	State MA	Zip Code 01890
	FEC ID number of contributing federal political committee. C		Transaction ID: 71210.C166660
	Amount of Each Receipt this Period		<input type="text"/> 2500.00
Name of Employer Information Requested		Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2500.00	

C.	Full Name (Last, First, Middle Initial) Michael Burd		Date of Receipt
	Mailing Address 584 Strawberry Hill Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 4 / 2 0 0 7
	City Concord	State MA	Zip Code 01742
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166669
	Amount of Each Receipt this Period		<input type="text"/> 500.00
Name of Employer Retired		Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) William Cammarano</p> <p>Mailing Address 299 Goddard Ave.</p> <p>City State Zip Code Brookline MA 02445</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2007</p> <p>Transaction ID: 80115.C166664</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Stephen Certa</p> <p>Mailing Address 408 Washington Street</p> <p>City State Zip Code Weymouth MA 02188</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Watch All Occupation Pest Management</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2007</p> <p>Transaction ID: 80115.C166754</p> <p>Amount of Each Receipt this Period 150.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Nathan Couch</p> <p>Mailing Address 5 High Rock Rd.</p> <p>City State Zip Code Dover MA 02030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2007</p> <p>Transaction ID: 80115.C166681</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
William Dawson

Mailing Address P.O. Box 1942

City State Zip Code
Eastham MA 02651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Real Estate Developer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 80115.C166782

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Wolfgang Falcone

Mailing Address 80 Hancock Ave.

City State Zip Code
Brockton MA 02301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: 71210.C166627

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Galloway

Mailing Address 11 Pine Cobble

City State Zip Code
Plymouth MA 02360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 71210.C166615

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Adolfo Garcia		Date of Receipt
	Mailing Address PO Box 135		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 9 / 2 0 0 7
	City	State	Zip Code
	Prides Crossing	MA	01965
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166753
Name of Employer Ropes & Gray		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
			Receipt

B.	Full Name (Last, First, Middle Initial) Joseph Green		Date of Receipt
	Mailing Address 2 John Matthews Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 5 / 2 0 0 7
	City	State	Zip Code
	Southborough	MA	01772
	FEC ID number of contributing federal political committee. C		Transaction ID: 71210.C166628
Name of Employer Green & Woodier		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Receipt

C.	Full Name (Last, First, Middle Initial) Herbert Grover		Date of Receipt
	Mailing Address 330 Main St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 8 / 2 0 0 7
	City	State	Zip Code
	Rowley	MA	01969
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166705
Name of Employer paradigm technologies		Occupation senior analyst	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1350.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Paul Gudonis

Mailing Address 9 Hickory Hill Rd.

City State Zip Code
Manchester-by-the- MA 01944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US First Foundation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 80115.C166706

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frederick Hafer

Mailing Address 1010 Waltham Street
Apt. H291

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 80115.C166697

Amount of Each Receipt this Period
75.00

Receipt

C. Full Name (Last, First, Middle Initial)
David Heidke

Mailing Address 24 Santee Road

City State Zip Code
Brockton MA 02301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State Street Bank Assistant Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: 71210.C166630

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

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

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

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FOR LINE NUMBER: PAGE 11 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
George Hoguet
Mailing Address 17 Chesam Rd.
City State Zip Code
Brookline MA 02146
FEC ID number of contributing federal political committee. **C**
Name of Employer State Street Global Advisors Occupation Portfolio Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 7750.00
Date of Receipt 12 / 04 / 2007
Transaction ID: 71210.C166617
Amount of Each Receipt this Period 5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Jeanne Kangas
Mailing Address 959 Hill Rd
City State Zip Code
Boxborough MA 01719
FEC ID number of contributing federal political committee. **C**
Name of Employer Arnold & Kangas, P.C. Occupation Lawyer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2750.00
Date of Receipt 12 / 05 / 2007
Transaction ID: 71210.C166623
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Brian Lafferty
Mailing Address PO Box 462
City State Zip Code
Bolton MA 01740
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 05 / 2007
Transaction ID: 71210.C166626
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
David Leary
 Mailing Address 623 Route 6A
 City State Zip Code
Sandwich MA 02537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 7
Transaction ID: 71210.C166620
 Amount of Each Receipt this Period
 50.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Salvatore Luciano
 Mailing Address 8 Rodney Rd
 City State Zip Code
Peabody MA 01960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 9 / 2 0 0 7
Transaction ID: 80115.C166755
 Amount of Each Receipt this Period
 100.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Merrill Mack
 Mailing Address 24 Terrace Rd.
 City State Zip Code
Weston MA 02493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Liberty Mutual Actuary
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 8 / 2 0 0 7
Transaction ID: 80115.C166709
 Amount of Each Receipt this Period
 150.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 300.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 13 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Holt Massey

Mailing Address 85 Merrimac Street

City State Zip Code
Boston MA 02114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Massey & Co., LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
12 / 27 / 2007

Transaction ID: 80115.C166780

Amount of Each Receipt this Period
10000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Matthew Merritt

Mailing Address ValleyHead Inc.
PO Box 714

City State Zip Code
Lenox MA 01240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Valleyhead Inc. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71210.C166662

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul Owens

Mailing Address PO Box 920390

City State Zip Code
Needham MA 02492-0005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IntrinsiQ, Inc Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2007

Transaction ID: 80115.C166670

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 11200.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Albert Paladino		Date of Receipt
	Mailing Address 12 Wachusett Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 8 / 2 0 0 7
	City	State	Zip Code
	Newton	MA	02467
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166713
Name of Employer Self-Employed		Occupation Venture Capitalist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	<input type="text"/> 125.00
Receipt			

B.	Full Name (Last, First, Middle Initial) Raymond Ruddy		Date of Receipt
	Mailing Address 26 Rolling Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 5 / 2 0 0 7
	City	State	Zip Code
	Dover	MA	02030
	FEC ID number of contributing federal political committee. C		Transaction ID: 71210.C166621
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4500.00	<input type="text"/> 4500.00
Receipt			

C.	Full Name (Last, First, Middle Initial) William Wheeler		Date of Receipt
	Mailing Address 174 Laurel Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 8 / 2 0 0 7
	City	State	Zip Code
	Chestnut Hill	MA	02467
	FEC ID number of contributing federal political committee. C		Transaction ID: 80115.C166710
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	<input type="text"/> 100.00
Receipt			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4725.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 32	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial) Brooks Zug		Date of Receipt
Mailing Address 202 Farm Road		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
City	State	Zip Code
Sherborn	MA	01770
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 80115.C166752
Name of Employer Harborvest Partners		Amount of Each Receipt this Period
Occupation Managing Director		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Receipt
Aggregate Year-to-Date ▼		<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="29300.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 32
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) April Flynn		Date of Receipt
	Mailing Address PO Box 2671		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Attleboro	MA	02763
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Olsten Staffing		Occupation Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="50.00"/>	
			Transaction ID: 71210.C166649
			Amount of Each Receipt this Period <input type="text" value="50.00"/>
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="50.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 80115.E10065 Date of Disbursement 12 / 10 / 2007
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 339.00
	City Boston State MA Zip Code 02127- Purpose of Disbursement Storage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	STORAGE

B.	Full Name (Last, First, Middle Initial) Hui Jojo Deng	Transaction ID: 71210.E10045 Date of Disbursement 12 / 03 / 2007
	Mailing Address 117 Beaconsfield Road	Amount of Each Disbursement this Period 536.25
	City Brookline State MA Zip Code 02445- Purpose of Disbursement Accounting Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ACCOUNTING SERVICES

C.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 71210.E10044 Date of Disbursement 12 / 03 / 2007
	Mailing Address PO Box 60036	Amount of Each Disbursement this Period 87.12
	City Los Angeles State CA Zip Code 90060-0036 Purpose of Disbursement Cable Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CABLE

SUBTOTAL of Disbursements This Page (optional)	▶	962.37
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80115.E10062 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period
	Purpose of Disbursement Express Mail	<input type="text" value="238.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

B.	Full Name (Last, First, Middle Initial) Guardian Guardian	Transaction ID: 80115.E10084 Date of Disbursement
	Mailing Address Boston Group Office 1 Liberty Square	<input type="text" value="12"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Boston State MA Zip Code 02109-	Amount of Each Disbursement this Period
	Purpose of Disbursement Insurance	<input type="text" value="408.56"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INSURANCE

C.	Full Name (Last, First, Middle Initial) The Hampshire House	Transaction ID: 80115.E10063 Date of Disbursement
	Mailing Address 84 Beacon St.	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Boston State MA Zip Code 02108-	Amount of Each Disbursement this Period
	Purpose of Disbursement Event	<input type="text" value="1279.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1927.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) HPH Inc. Harvard Pilgram Heal <hr/> Mailing Address 1200 Crown Colony Dr. <hr/> City Quincy State MA Zip Code 02169- <hr/> Purpose of Disbursement Health Insurances Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71210.E10046 Date of Disbursement 12 / 03 / 2007	Amount of Each Disbursement this Period 2064.86 HEALTH INSURANCES
B.	Full Name (Last, First, Middle Initial) Lyndsay Jones <hr/> Mailing Address 16 Oval Road <hr/> City Quincy State MA Zip Code 02170- <hr/> Purpose of Disbursement Reimbursement for travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80115.E10072 Date of Disbursement 12 / 10 / 2007	Amount of Each Disbursement this Period 127.08 REIMBURSEMENT FOR TRAVEL
C.	Full Name (Last, First, Middle Initial) Boston Marriott Newton <hr/> Mailing Address 2345 Commonwealth Ave. <hr/> City Newton State MA Zip Code 02466- <hr/> Purpose of Disbursement Event-State committee meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71210.E10047 Date of Disbursement 12 / 03 / 2007	Amount of Each Disbursement this Period 94.50 EVENT-STATE COMMITTEE MEE- TING

SUBTOTAL of Disbursements This Page (optional) ▶

2286.44

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Merchants Bankcard</p> <p>Mailing Address Fleet Bank 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Credit card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10076 Date of Disbursement: 12 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 25.30</p> <p>CREDIT CARD FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Merchants Bankcard</p> <p>Mailing Address Fleet Bank 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10075 Date of Disbursement: 12 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 77.46</p> <p>CREIDT CARD FEE</p>
<p>C. Full Name (Last, First, Middle Initial) Merchants Bankcard</p> <p>Mailing Address Fleet Bank 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Credit card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10077 Date of Disbursement: 12 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 0.49</p> <p>CREDIT CARD FEE</p>

SUBTOTAL of Disbursements This Page (optional)	103.25
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Merchants Bankcard	Transaction ID: 80122.E10134 Date of Disbursement 12 / 03 / 2007
	Mailing Address Fleet Bank 100 Federal Street	Amount of Each Disbursement this Period 75.19
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Credit card Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEE

B.	Full Name (Last, First, Middle Initial) Merchants Bankcard	Transaction ID: 80122.E10135 Date of Disbursement 12 / 03 / 2007
	Mailing Address Fleet Bank 100 Federal Street	Amount of Each Disbursement this Period 25.00
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Credit Card Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEE

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80115.E10078 Date of Disbursement 12 / 01 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 25.00
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Bank Charge	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK CHARGE

SUBTOTAL of Disbursements This Page (optional) ▶

125.19

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 71210.E10041 Date of Disbursement 12 / 10 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 126.64
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL SERVICES

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80115.E10060 Date of Disbursement 12 / 13 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1815.82
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll-Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL-TAXES

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80115.E10061 Date of Disbursement 12 / 13 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 961.54
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll-401K	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL-401K

SUBTOTAL of Disbursements This Page (optional)	▶	2904.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 71210.E10042 Date of Disbursement 12 / 14 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 155.00
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Services - 401 K	Category/ Type PAYROLL SERVICES - 401 K
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80115.E10093 Date of Disbursement 12 / 27 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 961.54
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll- 401 K	Category/ Type PAYROLL- 401 K
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80115.E10092 Date of Disbursement 12 / 27 / 2007
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1815.82
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll -Taxes	Category/ Type PAYROLL -TAXES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2932.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Poland Spring Poland Spring	Transaction ID: 80122.E10133 Date of Disbursement 12 / 04 / 2007
	Mailing Address Processing Center PO Box 52271	Amount of Each Disbursement this Period 77.07
	City Phoenix State AZ Zip Code 85072-	
	Purpose of Disbursement Bottle Water	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BOTTLE WATER

B.	Full Name (Last, First, Middle Initial) Poland Spring Poland Spring	Transaction ID: 80115.E10066 Date of Disbursement 12 / 10 / 2007
	Mailing Address Processing Center PO Box 52271	Amount of Each Disbursement this Period 28.64
	City Phoenix State AZ Zip Code 85072-	
	Purpose of Disbursement Bottle water	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BOTTLE WATER

C.	Full Name (Last, First, Middle Initial) Jody's Quik Print	Transaction ID: 80115.E10064 Date of Disbursement 12 / 10 / 2007
	Mailing Address P.O. Box 1068	Amount of Each Disbursement this Period 2229.05
	City Middleton State MA Zip Code 01949-	
	Purpose of Disbursement Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING

SUBTOTAL of Disbursements This Page (optional)	2334.76
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Hudson Portuguese CI Riverview

Mailing Address 13 Port St.

City Hudson State MA Zip Code 01749-

Purpose of Disbursement
Event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71210.E10050

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

1569.80

EVENT

B.

Full Name (Last, First, Middle Initial)
Hudson Portuguese CI Riverview

Mailing Address 13 Port St.

City Hudson State MA Zip Code 01749-

Purpose of Disbursement
Event Balance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80115.E10071

Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

63.72

EVENT BALANCE

C.

Full Name (Last, First, Middle Initial)
SCM Associates

Mailing Address Steve Meyers
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement
Direct Mail and Telemarketing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71210.E10051

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

3445.20

DIRECT MAIL AND TELEMARKE-
TING

SUBTOTAL of Disbursements This Page (optional) ▶

5078.72

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Staples, Inc.	Transaction ID: 71210.E10048 Date of Disbursement 12 / 03 / 2007
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 139.06
	City Des Moines	State IA
	Zip Code 50368-9020	Category/ Type
	Purpose of Disbursement Office Supplies	OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile	Transaction ID: 80115.E10067 Date of Disbursement 12 / 10 / 2007
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 157.74
	City Saint Louis	State MO
	Zip Code 63179-	Category/ Type
	Purpose of Disbursement Phone service	PHONE SERVICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 80115.E10088 Date of Disbursement 12 / 17 / 2007
	Mailing Address P.O. Box 1	Amount of Each Disbursement this Period 402.00
	City Worcester	State MA
	Zip Code 01654-	Category/ Type
	Purpose of Disbursement Phone	PHONE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	698.80
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Verizon- Verizon Internet Ser	Transaction ID: 71210.E10049 Date of Disbursement 12 / 03 / 2007
	Mailing Address PO Box 101096	Amount of Each Disbursement this Period 767.62
	City Atlanta State GA Zip Code 30392-	
	Purpose of Disbursement Internet Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INTERNET SERVICES

B.	Full Name (Last, First, Middle Initial) Verizon- Verizon Internet Ser	Transaction ID: 80115.E10112 Date of Disbursement 12 / 10 / 2007
	Mailing Address PO Box 101096	Amount of Each Disbursement this Period 767.62
	City Atlanta State GA Zip Code 30392-	
	Purpose of Disbursement Internet Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INTERNET SERVICES

C.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 80115.E10068 Date of Disbursement 12 / 10 / 2007
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 862.41
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Reimbursement: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

2397.65

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City Reading State MA Zip Code 01867-

Purpose of Disbursement
R. Willington Reimusement for personal car used

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80115.E10069

Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

742.80

[MEMO ITEM]

MEMO: R. WILLINGTON REIMU-
SEMENT FOR PERSONAL CAR
USED

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

21750.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Bruce Harrison	Transaction ID: 80115.E10070 Date of Disbursement 12 / 10 / 2007
	Mailing Address 101 Elm St	Amount of Each Disbursement this Period 1000.00
	City Wakefield State MA Zip Code 01880-	
	Purpose of Disbursement Payroll-Administration Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL-ADMINISTRATION

B.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 80115.E10057 Date of Disbursement 12 / 13 / 2007
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 1232.51
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 80115.E10089 Date of Disbursement 12 / 27 / 2007
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 1232.51
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	3465.02
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80115.E10058 Date of Disbursement 12 / 13 / 2007
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 676.92
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80115.E10090 Date of Disbursement 12 / 27 / 2007
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 676.92
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 80115.E10059 Date of Disbursement 12 / 13 / 2007
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 1399.58
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	2753.42
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80115.E10091

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

1399.58

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1399.58

TOTAL This Period (last page this line number only)

7618.02

Image# 28930079092

Form/Schedule: **F3XN**

Transaction ID:

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