

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

ADDRESS (number and street) 1800 POST ROAD SUITE 17-I WARWICK RI 02886 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00078196 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2014 through 06 / 30 / 2014

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 Michael Grossi

Signature of Treasurer Michael Grossi [Electronically Filed] Date 07 / 17 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="14889.01"/>	<input type="text" value="14889.01"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20200.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="31242.92"/>	<input type="text" value="66372.92"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="51443.71"/>	<input type="text" value="81261.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32620.61"/>	<input type="text" value="62438.83"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18823.10"/>	<input type="text" value="18823.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	0.00	9980.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	9980.00
(b) Political Party Committees	16850.00	16850.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16850.00	26830.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	16250.00
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).....	0.00	0.00
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	14392.92	23292.92
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	14392.92	23292.92
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	31242.92	66372.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16850.00	43080.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	3921.35	6498.04
(ii) Non-Federal Share.....	14751.68	24445.00
(b) Other Federal Operating Expenditures	0.00	9980.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18673.03	40923.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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	13947.58	21515.79
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	13947.58	21515.79
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	32620.61	62438.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17868.93	37993.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	16850.00	26830.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16850.00	26830.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3921.35	16478.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3921.35	16478.04

**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 OF 42
<input type="checkbox"/> 11a	<input checked="" 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

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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. REPUBLICAN NATIONAL COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 310 First Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	01	/	2014

Transaction ID : SA11B.4420

Amount of Each Receipt this Period
3950.00

RNC Allotment

B. REPUBLICAN NATIONAL COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 310 First Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	04	/	2014

Transaction ID : SA11B.4421

Amount of Each Receipt this Period
3950.00

Monthly Allotment

C. REPUBLICAN NATIONAL COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 310 First Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2014

Transaction ID : SA11B.4422

Amount of Each Receipt this Period
3950.00

Monthly

SUBTOTAL of Receipts This Page (optional).....	▶	11850.00
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 7 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. REPUBLICAN NATIONAL COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 First Street, SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00003418
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 33100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014
Transaction ID : SA11B.4423
 Amount of Each Receipt this Period
 5000.00
 Transfer from State

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	16850.00

**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 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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : SB30B.5009

Amount of Each Disbursement this Period

1730.77

Full Name (Last, First, Middle Initial)

B. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
payroll expense qualifying employee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Transaction ID : SB30B.5012

Amount of Each Disbursement this Period

1148.94

Full Name (Last, First, Middle Initial)

C. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2014

Transaction ID : SB30B.5015

Amount of Each Disbursement this Period

1424.00

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

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

4303.71

**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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SB30B.5017

Amount of Each Disbursement this Period

1424.00

Full Name (Last, First, Middle Initial)

B. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SB30B.5018

Amount of Each Disbursement this Period

1424.00

Full Name (Last, First, Middle Initial)

C. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SB30B.5019

Amount of Each Disbursement this Period

1274.99

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

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

4122.99

**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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SB30B.5020

Amount of Each Disbursement this Period

1274.99

Full Name (Last, First, Middle Initial)

B. Robert Paquin

Mailing Address 1191 Tower Hill Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SB30B.5021

Amount of Each Disbursement this Period

1275.00

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
fringe/taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SB30B.5013

Amount of Each Disbursement this Period

299.66

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

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

2849.65

**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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
fringe/taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5022

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5027

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5028

Amount of Each Disbursement this Period

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

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 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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement fringe/taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2014

Transaction ID : SB30B.5023

Amount of Each Disbursement this Period

299.04

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement fringe/taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2014

Transaction ID : SB30B.5030

Amount of Each Disbursement this Period

326.10

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement fringe/taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : SB30B.5024

Amount of Each Disbursement this Period

241.28

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

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

866.42

**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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
frprocessing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : SB30B.5033

Amount of Each Disbursement this Period

45.45

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
frprocessing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : SB30B.5037

Amount of Each Disbursement this Period

45.45

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
frprocessing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : SB30B.5032

Amount of Each Disbursement this Period

45.45

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

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

136.35

**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

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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
fringe/taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

Transaction ID : SB30B.5025

Amount of Each Disbursement this Period

3	2	6	.	1	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
fringe/taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

Transaction ID : SB30B.5026

Amount of Each Disbursement this Period

3	2	6	.	1	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
frprocessing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

Transaction ID : SB30B.5034

Amount of Each Disbursement this Period

4	5	.	4	5
---	---	---	---	---

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

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

6	9	7	.	6	6
---	---	---	---	---	---

6	9	7	.	6	6
---	---	---	---	---	---

**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)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
frprocessing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SB30B.5036

Amount of Each Disbursement this Period

45.45

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 501 WOMANOAG TRAIL

City RIVERSIDE State RI Zip Code 02915

Purpose of Disbursement
fringe/taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SB30B.5120

Amount of Each Disbursement this Period

572.29

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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

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

617.74

13947.58

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 04 / 08 / 2014	2364.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2364.00
Transaction ID : H3.4918	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 04 / 09 / 2014	358.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	358.79
Transaction ID : H3.4919	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 04 / 23 / 2014	4323.54

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4323.54
Transaction ID : H3.4922	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 04 / 28 / 2014	4982.71

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4982.71
Transaction ID : H3.4923	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 05 / 01 / 2014	822.94

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	822.94
Transaction ID : H3.4924	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 05 / 08 / 2014	254.33

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	254.33
Transaction ID : H3.4925	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 05 / 20 / 2014	300.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	300.00
Transaction ID : H3.4926	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 05 / 30 / 2014	386.61

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	386.61
Transaction ID : H3.4927	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE	MM / DD / YYYY 06 / 13 / 2014	600.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	100.00
Transaction ID : H3.4928	
ii) Generic Voter Drive	500.00
Transaction ID : H3.4928.0	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	13892.92
TOTAL This Period (Generic Voter Drive)	500.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	14392.92

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARK SMILEY		Transaction ID : H4.4444		Allocated Activity or Event:	
Mailing Address 14 EVIE DR				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City WARREN	State RI	Zip Code		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: reimbursement open house		004		5257.57	
Activity or Event Identifier: Voter Drive()		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 04 / 06 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
32.25				121.30	
		=		TOTAL AMOUNT	
				153.55	

B. Full Name (Last, First, Middle Initial) Red Maverick Media		Transaction ID : H4.4447		Allocated Activity or Event:	
Mailing Address 420 North 2nd St				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Harrisberg	State PA	Zip Code 17101		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Polling		005		5750.57	
Activity or Event Identifier: Voter Drive()		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 04 / 08 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
103.53				389.47	
		=		TOTAL AMOUNT	
				493.00	

C. Full Name (Last, First, Middle Initial) Gio Calise		Transaction ID : H4.4473		Allocated Activity or Event:	
Mailing Address 77 Cranberry Road				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Hope	State RI	Zip Code 02831		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Reimbursement for constant contact see memo		004		6275.57	
Activity or Event Identifier: Voter Drive()		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 05 / 02 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
110.25				414.75	
		=		TOTAL AMOUNT	
				525.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
246.03		925.52		1171.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: H4

Transaction ID : H4.4444

Reception at HQ to kick of main election season. Mainly wines at Airport Liquors, 1800 Post Road, Warwick RI \$153.55

Form/Schedule: H4

Transaction ID: H4.4473

Reimbursement for Constatnt Contact 1601 Trapelo Road, Waltham MA 02451.
Reimbursement for enhanced communication software in amount of \$525

Gio Calise

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4480
Five9
Mailing Address 4000 Executive Parkway suite 400
City San Ramon State CA Zip Code 94583
Purpose of Disbursement: Polling
Activity or Event Identifier: Voter Drive()
Allocated Activity or Event: [X] Voter Drive
Allocated Activity or Event Year-To-Date: 6597.57
Date: 05 / 14 / 2014
FEDERAL SHARE: 67.62 NONFEDERAL SHARE: 254.38 TOTAL AMOUNT: 322.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4497
Five9
Mailing Address 4000 Executive Parkway suite 400
City San Ramon State CA Zip Code 94583
Purpose of Disbursement: Polling
Activity or Event Identifier: Voter Drive()
Allocated Activity or Event: [X] Voter Drive
Allocated Activity or Event Year-To-Date: 6919.57
Date: 06 / 16 / 2014
FEDERAL SHARE: 67.62 NONFEDERAL SHARE: 254.38 TOTAL AMOUNT: 322.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4437
Travelers Insurance
Mailing Address 1 Tower Square
City Hartford State CT Zip Code 06183
Purpose of Disbursement: Workers Comp
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative
Allocated Activity or Event Year-To-Date: 7651.99
Date: 04 / 02 / 2014
FEDERAL SHARE: 102.06 NONFEDERAL SHARE: 383.94 TOTAL AMOUNT: 486.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE: 237.30 NONFEDERAL SHARE: 892.70 TOTAL AMOUNT: 1130.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE: NONFEDERAL SHARE: TOTAL AMOUNT:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Form A: Airport Plaza Associates, Transaction ID: H4.4439. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Year-To-Date amount (8226.99), Date (04/02/2014), and a summary table showing Federal Share (120.75), NonFederal Share (454.25), and Total Amount (575.00).

Form B: Airport Plaza Associates, Transaction ID: H4.4440. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (utilities), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Year-To-Date amount (8531.59), Date (04/02/2014), and a summary table showing Federal Share (63.97), NonFederal Share (240.63), and Total Amount (304.60).

Form C: COX COMMUNICATIONS, Transaction ID: H4.4441. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Cable and Internet), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Year-To-Date amount (9412.96), Date (04/02/2014), and a summary table showing Federal Share (185.09), NonFederal Share (696.28), and Total Amount (881.37).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (369.81) + NONFEDERAL SHARE (1391.16) = TOTAL AMOUNT (1760.97)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Form A: Full Name (Last, First, Middle Initial) LANCE CHAPPELL, Transaction ID : H4.4442, Allocated Activity or Event: Administrative, Date: 04/02/2014, Total Amount: 225.00

Form B: Full Name (Last, First, Middle Initial) Aggragate Aggragate, Transaction ID : H4.4443, Allocated Activity or Event: Administrative, Date: 04/03/2014, Total Amount: 104.32

Form C: Full Name (Last, First, Middle Initial) Aggragate Aggragate, Transaction ID : H4.4445, Allocated Activity or Event: Administrative, Date: 04/07/2014, Total Amount: 70.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (84.01), NONFEDERAL SHARE (316.01), TOTAL AMOUNT (400.02)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Form A: WASTE MANAGEMENT. Transaction ID: H4.4449. Allocated Activity or Event: Administrative. Date: 04/09/2014. Total Amount: 85.44.

Form B: MARK SMILEY. Transaction ID: H4.4450. Allocated Activity or Event: Administrative. Date: 04/09/2014. Total Amount: 1606.65.

Form C: DUNKIN DONUTS. Transaction ID: H4.4451. Allocated Activity or Event: Administrative. Date: 04/14/2014. Total Amount: 11.07.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 357.66, 1345.50, 1703.16.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : H4.4450

For Memphis RNC winter meeting. Southwest Air , 2707 LoveField Dr Dallas Tx 75235, \$453. Peabody Hotel, 149 Union Ave, Memphis, TN 38015, \$837, BB Kings 143 Beale St Memphis TN 38103, \$160., Yellow Cab, 581 S 2nd St, Memphis TN 38126, \$76., Parking at TF Green Airport, Airport Road Warwick Ri. \$80. Travel expense for Mark Smiley

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Form A: Five9, Transaction ID: H4.4452. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: Airport Plaza Associates, Transaction ID: H4.4454. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: WASTE MANAGEMENT, Transaction ID: H4.4455. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (206.31), NONFEDERAL SHARE (776.13), TOTAL AMOUNT (982.44).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4456 Aggragate Aggragate		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address		Allocated Activity or Event Year-To-Date 12523.58	
City State Zip Code Aggragate RI 00000	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.25 + 19.75 = 25.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4458 RUSTIN MARKETING		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 35 CONGDON HILL RD		Allocated Activity or Event Year-To-Date 12998.58	
City State Zip Code NORTH KINGSTOWN RI	005 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Polling Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 99.75 + 375.25 = 475.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4461 CANNON FINANCIAL SERVICES		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 100 GAITHER DR		Allocated Activity or Event Year-To-Date 13630.38	
City State Zip Code MT LAUREL NJ 08054	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Copier Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 132.68 + 499.12 = 631.80	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.68		894.12		1131.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4462 RI SHRINERS		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address ONE RHODES PLACE				
City State Zip Code CRANSTON RI 02905				
Purpose of Disbursement: Meeting Rental	007	Allocated Activity or Event Year-To-Date 13755.38		
Activity or Event Identifier: Administrative	Category/ Type	Date 04 / 23 / 2014		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.25		98.75		125.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4464 Radisson Hotel		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2081 Post Road				
City State Zip Code Warwick RI 02886				
Purpose of Disbursement: Guillroy Event	007	Allocated Activity or Event Year-To-Date 16731.21		
Activity or Event Identifier: Administrative	Category/ Type	Date 04 / 26 / 2014		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
624.92		2350.91		2975.83

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4463 Aggragate Aggragate		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address				
City State Zip Code Aggragate RI 00000				
Purpose of Disbursement: Food and Bev for Staff Event	001	Allocated Activity or Event Year-To-Date 16871.34		
Activity or Event Identifier: Administrative	Category/ Type	Date 04 / 28 / 2014		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.43		110.70		140.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
680.60		2560.36		3240.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4466 STAPLES		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1800 POST ROAD		Allocated Activity or Event Year-To-Date 16911.76	
City WARWICK State RI Zip Code 02886	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Office Supplies		Allocated Activity or Event Year-To-Date 16911.76	
Activity or Event Identifier: Administrative		Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="8.49"/> + <input type="text" value="31.93"/> = <input type="text" value="40.42"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4467 Sports More RI		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address		Allocated Activity or Event Year-To-Date 17228.89	
City Warwick State RI Zip Code	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement:		Allocated Activity or Event Year-To-Date 17228.89	
Activity or Event Identifier: Administrative		Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="66.60"/> + <input type="text" value="250.53"/> = <input type="text" value="317.13"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4470 STEPHEN TETZNER		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 216 WOODHILL ROAD		Allocated Activity or Event Year-To-Date 20250.89	
City NARRAGANSETT State RI Zip Code 02882	007 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Paid to Radisson Hotel, Warwick RI for fund raiser		Allocated Activity or Event Year-To-Date 20250.89	
Activity or Event Identifier: Administrative		Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="634.62"/> + <input type="text" value="2387.38"/> = <input type="text" value="3022.00"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="709.71"/>		<input type="text" value="2669.84"/>		<input type="text" value="3379.55"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : H4.4470

Paid to Radisson Hotel, Warwick RI for luncheon conference/fund raiser for RIGOP

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) COX COMMUNICATIONS Mailing Address 621 WILLIAM ST. City EAST ORANGE State NJ Zip Code 07017 Purpose of Disbursement: Internet and Cable Activity or Event Identifier: Administrative		Transaction ID : H4.4469 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 20547.71 Date 05 / 01 / 2014 Category/Type 001		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.33		234.49		296.82

B. Full Name (Last, First, Middle Initial) MARK SMILEY Mailing Address 14 EVIE DR City WARREN State RI Zip Code Purpose of Disbursement: Reimbursement of exp Activity or Event Identifier: Administrative		Transaction ID : H4.4475 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 20605.96 Date 05 / 02 / 2014 Category/Type 001		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.23		46.02		58.25

C. Full Name (Last, First, Middle Initial) WASTE MANAGEMENT Mailing Address 1610 PONTIAC AVENUE City CRANSTON State RI Zip Code 02920 Purpose of Disbursement: Trash Activity or Event Identifier: Administrative		Transaction ID : H4.4476 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 20643.89 Date 05 / 05 / 2014 Category/Type 001		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.97		29.96		37.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.53		310.47		393.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.4477**
CANNON FINANCIAL SERVICES
Mailing Address 100 GAITHER DR

City State Zip Code
MT LAUREL NJ 08054

Purpose of Disbursement:
copier

Activity or Event Identifier:
Administrative

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
20827.78

Date 05 / 05 / 2014

Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.62		145.27		183.89

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.4479**
Aggragate Aggragate
Mailing Address

City State Zip Code
Aggregate RI 00000

Purpose of Disbursement:
Travel for meeting in MA

Activity or Event Identifier:
Administrative

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
20948.98

Date 05 / 09 / 2014

Category/Type 002

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.45		95.75		121.20

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.4485**
Radisson Hotel
Mailing Address 2081 Post Road

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
dep for convention

Activity or Event Identifier:
Administrative

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
21248.98

Date 05 / 23 / 2014

Category/Type 007

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.07		478.02		605.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4489 STAPLES		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1800 POST ROAD		Allocated Activity or Event Year-To-Date 21480.06	
City WARWICK State RI Zip Code 02886	001 Category/ Type	Date 06 / 02 / 2014	
Purpose of Disbursement: OFFICE SUPPLIES Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
48.53		182.55	231.08

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4490 Aggragate Aggragate		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address		Allocated Activity or Event Year-To-Date 21494.45	
City Aggragate State RI Zip Code 00000	001 Category/ Type	Date 06 / 05 / 2014	
Purpose of Disbursement: sUPPLIES Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
3.02		11.37	14.39

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4491 COX COMMUNICATIONS		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 621 WILLIAM ST.		Allocated Activity or Event Year-To-Date 21790.77	
City EAST ORANGE State NJ Zip Code 07017	001 Category/ Type	Date 06 / 09 / 2014	
Purpose of Disbursement: Internet and CABLE Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
62.23		234.09	296.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.78		428.01		541.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4492
WASTE MANAGEMENT
Mailing Address 1610 PONTIAC AVENUE
City CRANSTON State RI Zip Code 02920
Purpose of Disbursement: Trash
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 21835.87
Date 06 / 09 / 2014
FEDERAL SHARE 9.47 + NONFEDERAL SHARE 35.63 = TOTAL AMOUNT 45.10

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4493
UNITED STATES POSTAL SERVICE
Mailing Address 24 CORLISS ST
City PROVIDENCE State RI Zip Code 02904
Purpose of Disbursement: postage
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 21884.87
Date 06 / 11 / 2014
FEDERAL SHARE 10.29 + NONFEDERAL SHARE 38.71 = TOTAL AMOUNT 49.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4498
Radisson Hotel
Mailing Address 2081 Post Road
City Warwick State RI Zip Code 02886
Purpose of Disbursement: Convention
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 23584.87
Date 06 / 26 / 2014
FEDERAL SHARE 357.00 + NONFEDERAL SHARE 1343.00 = TOTAL AMOUNT 1700.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 376.76 + NONFEDERAL SHARE 1417.34 = TOTAL AMOUNT 1794.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BEst Western		Transaction ID : H4.4502	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Post ROad			Allocated Activity or Event Year-To-Date 23715.94	
City Warwick	State RI	Zip Code 02886	Date 06 / 26 / 2014	
Purpose of Disbursement: Travel for RNC Rep		002		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
27.52			103.55	
		=	TOTAL AMOUNT	
			131.07	

B. Full Name (Last, First, Middle Initial) Aggragate Aggragate		Transaction ID : H4.4435	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			Allocated Activity or Event Year-To-Date 23760.94	
City Aggregate	State RI	Zip Code 00000	Date 06 / 27 / 2014	
Purpose of Disbursement: Bank Fees		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
9.45			35.55	
		=	TOTAL AMOUNT	
			45.00	

C. Full Name (Last, First, Middle Initial) STAPLES		Transaction ID : H4.4504	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1800 POST ROAD			Allocated Activity or Event Year-To-Date 23863.20	
City WARWICK	State RI	Zip Code 02886	Date 06 / 27 / 2014	
Purpose of Disbursement: Office Supplies		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
21.47			80.79	
		=	TOTAL AMOUNT	
			102.26	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.44		219.89		278.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full) RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4505 Constant Contact Mailing Address 1601 Trapelo Road City Waltham State MA Zip Code 02451 Purpose of Disbursement: Email Activity or Event Identifier: Administrative Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 23948.20 Date 06 / 30 / 2014 FEDERAL SHARE 17.85 + NONFEDERAL SHARE 67.15 = TOTAL AMOUNT 85.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4507 STAPLES Mailing Address 1800 POST ROAD City WARWICK State RI Zip Code 02886 Purpose of Disbursement: Office Supplies Activity or Event Identifier: Administrative Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 24023.47 Date 06 / 30 / 2014 FEDERAL SHARE 15.81 + NONFEDERAL SHARE 59.46 = TOTAL AMOUNT 75.27

C. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: Allocated Activity or Event: [] Administrative [] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 33.66, 126.61, 160.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3921.35, 14751.68, 18673.03