

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Rhode Island Hope PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	2

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		40915.20
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	3301.93									
(c) Total Receipts (from Line 19)	80250.00	92750.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83551.93	133665.20								
7. Total Disbursements (from Line 31)	64178.54	114291.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19373.39	19373.39								
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)	3089.01									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Rhode Island Hope PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	2

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	37750.00	50250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	37750.00	50250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	42500.00	42500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	80250.00	92750.00
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)	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)	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))	80250.00	92750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	80250.00	92750.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	16678.54	41791.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16678.54	41791.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47500.00	72500.00
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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	64178.54	114291.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64178.54	114291.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	80250.00	92750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80250.00	92750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16678.54	41791.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16678.54	41791.81

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 / 22
	<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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Mortimer Berkowitz, III		Date of Receipt
	Mailing Address 131 East 69th Street, Apt. 8		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 8 / 2 0 1 0
	City	State	Zip Code
	New York	NY	10021
	FEC ID number of contributing federal political committee. C		Transaction ID: C5153740
Name of Employer Healthpoint Capital		Occupation President	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"/> 2000.00

B.	Full Name (Last, First, Middle Initial) Janet G. Whitehouse		Date of Receipt
	Mailing Address 7476 Frogtown Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 9 / 2 0 1 0
	City	State	Zip Code
	Marshall	VA	20115
	FEC ID number of contributing federal political committee. C		Transaction ID: C5154800
Name of Employer N/A		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 ▼	<input type="text"/> 5000.00

C.	Full Name (Last, First, Middle Initial) Peter Morton		Date of Receipt
	Mailing Address 510 North Robertson Boulevard		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Los Angeles	CA	90048
	FEC ID number of contributing federal political committee. C		Transaction ID: C5155040
Name of Employer Hard Rock Hotel		Occupation Chief Executive Officer	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"/> 5000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 12000.00
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: (check only one)	PAGE 7 / 22
	<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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Duncan A. Chapman	Date of Receipt MM / DD / YYYY 06 / 02 / 2010
	Mailing Address 106 East 85th Street	Transaction ID: C5155042
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Lexington Partners Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) William H. Crocker	Date of Receipt MM / DD / YYYY 06 / 07 / 2010
	Mailing Address 4 Chalfont Court	Transaction ID: C5150902
	City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) John L. Drew	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 528 Ramona Street	Transaction ID: C5157054
	City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Technology Crossover Ventures General Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
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 8 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rhode Island Hope PAC

A. Full Name (Last, First, Middle Initial)
Jane A. Ridgway
Mailing Address 212 Coral Lane
City State Zip Code
Palm Beach FL 33480
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 24 / 2010
Transaction ID: C5150904
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Steven A. Ballmer
Mailing Address One Microsoft Way
City State Zip Code
Redmond WA 98052
FEC ID number of contributing federal political committee. **C**
Name of Employer Microsoft Corporation Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 06 / 21 / 2010
Transaction ID: C5161964
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Gerald T. Harrington
Mailing Address 209 Blackberry Hill Drive
City State Zip Code
South Kingston RI 02879
FEC ID number of contributing federal political committee. **C**
Name of Employer Capitol City Group, LLC Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 06 / 29 / 2010
Transaction ID: C5173105
Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) ► 3750.00
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 / 22
	<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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Dariush P. Maanavi	Date of Receipt MM / DD / YYYY 06 / 29 / 2010
	Mailing Address 1001 5th Avenue Apartment 4A	Transaction ID: C5174086
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Tevo, Inc. Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Joseph F. Azrack	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address P.O. Box 690	Transaction ID: C5157058
	City State Zip Code Lincoln MA 01773	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Apollo Management Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Bickel & Brewer	Date of Receipt MM / DD / YYYY 06 / 15 / 2010
	Mailing Address 1717 Main Street Suite 4800	Transaction ID: C5160196
	City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)	11000.00
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 10 / 22
	(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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) William A, Brewer, III		Date of Receipt
	Mailing Address 1717 Main Street Suite 4800		<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 06 / 15 / 2010
	City	State	Zip Code
	Washington	DC	75201
	FEC ID number of contributing federal political committee.		Transaction ID: C5160197
	C		Amount of Each Receipt this Period
Name of Employer Bickel & Brewer		Occupation Partner	<input type="text"/> 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	[MEMO ITEM] *
		<input type="text"/> 5000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/> 37750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rhode Island Hope PAC

A. Full Name (Last, First, Middle Initial)
Lockheed Martin Corporation Employees' PAC

Mailing Address 1550 Crystal Drive
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: C5172990

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
SAIC, Inc. Voluntary Political Action Committee

Mailing Address 10260 Campus Point Drive
MS:F2

City San Diego State CA Zip Code 92121

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2010

Transaction ID: C5154801

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Int'l Brotherhood Of Electrical Workers COPE

Mailing Address 900 Seventh Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2010

Transaction ID: C5172993

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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 / 22
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rhode Island Hope PAC

A. Full Name (Last, First, Middle Initial)
NY State Laborers' Int'l Union of North AmericaPAC

Mailing Address 18 Corporate Woods Boulevard

City Albany State NY Zip Code 12211

FEC ID number of contributing federal political committee. **C** C00220566

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 02 / 2010
Transaction ID: C5157053
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Microsoft Corporation Political Action Committee

Mailing Address 16011 NE 36th Way
Box 97017

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 08 / 2010
Transaction ID: C5157055
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
CVS/Caremark Corporation Employee's PAC

Mailing Address 1300 Eye Street, NW
Suite 525W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: C5206565
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rhode Island Hope PAC

A. Full Name (Last, First, Middle Initial)
Comcast Corporation Political Action Committee

Mailing Address 1701 JFK Boulevard
49th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 8 / 2 0 1 0

Transaction ID: C5157056

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary PCP

Mailing Address 2941 Fairview Park Drive
Suite 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 1 0

Transaction ID: C5173106

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
American Association For Justice PAC

Mailing Address 1050 31st Street, NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 4 / 2 0 1 0

Transaction ID: C5150908

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 12500.00

TOTAL This Period (last page this line number only) ► 42500.00

**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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Perkins Coie	Transaction ID: D269590 Date of Disbursement 06 / 23 / 2010
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 3012.45
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & 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) ▼

B.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D269593 Date of Disbursement 06 / 01 / 2010
	Mailing Address 10 G Street, NW Suite 470	Amount of Each Disbursement this Period 3056.65
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Consulting 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) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D269594 Date of Disbursement 06 / 04 / 2010
	Mailing Address 10 G Street, NW Suite 470	Amount of Each Disbursement this Period 3056.65
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Consulting 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) ▼

SUBTOTAL of Disbursements This Page (optional)	9125.75
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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Merchant Account Services <hr/> Mailing Address P.O. Box 6600 <hr/> City Hagerstown State MD Zip Code 21740 <hr/> Purpose of Disbursement Credit Card Processing Fee 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: D269585 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 44.95
B.	Full Name (Last, First, Middle Initial) Clarke Cooke House <hr/> Mailing Address Bannister's Wharf P.O. Box 249 <hr/> City Newport State RI Zip Code 02840 <hr/> Purpose of Disbursement Catering 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: D269605 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Merchant Account Services <hr/> Mailing Address P.O. Box 6600 <hr/> City Hagerstown State MD Zip Code 21740 <hr/> Purpose of Disbursement Credit Card Processing Fee 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: D269586 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 75.73

SUBTOTAL of Disbursements This Page (optional) ▶	620.68
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Seascope Systems, Inc. <hr/> Mailing Address 103 Ruggles Avenue <hr/> City Newport State RI Zip Code 02840 <hr/> Purpose of Disbursement Catering Candidate Name Category/Type <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: D269587 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1475.00</div>
B.	Full Name (Last, First, Middle Initial) Seascope Systems, Inc. <hr/> Mailing Address 103 Ruggles Avenue <hr/> City Newport State RI Zip Code 02840 <hr/> Purpose of Disbursement Catering Candidate Name Category/Type <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: D269588 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">442.50</div>
C.	Full Name (Last, First, Middle Initial) Hotel Viking <hr/> Mailing Address 1 Bellevue Avenue <hr/> City Newport State RI Zip Code 02840 <hr/> Purpose of Disbursement Travel Candidate Name Category/Type <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: D269598 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">3491.70</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">5409.20</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

**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)
Rhode Island Hope PAC

A.

Full Name (Last, First, Middle Initial)
Perkins Coie

Transaction ID: D269589

Date of Disbursement

Mailing Address 607 14th Street, NW
Suite 800

05 / 27 / 2010

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

1500.50

Purpose of Disbursement
Legal & Accounting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1500.50

TOTAL This Period (last page this line number only)

16656.13

**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 checked="" 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)
Rhode Island Hope PAC

<p>A. Full Name (Last, First, Middle Initial) Bennet For Colorado</p> <p>Mailing Address P.O. Box 3078</p> <p>City Denver State CO Zip Code 80201</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Michael Bennet</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D269600 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Hodes For Senate</p> <p>Mailing Address 379 Elm Street</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Paul Hodes</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D269591 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Chris Coons For Delaware</p> <p>Mailing Address P.O. Box 9900</p> <p>City Newark State DE Zip Code 19714</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Chris Coons</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D269601 Date of Disbursement 06 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Rhode Island Hope PAC

A.

Full Name (Last, First, Middle Initial)
Hodes For Senate

Mailing Address 379 Elm Street

City Manchester State NH Zip Code 03101

Purpose of Disbursement
Contribution

Candidate Name
Paul Hodes

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NH District:

Transaction ID: D269592
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Sestak For Senate

Mailing Address P.O. Box 1936

City Media State PA Zip Code 19063

Purpose of Disbursement
Contribution

Candidate Name
Joseph Sestak, Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District:

Transaction ID: D269602
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Fisher For Ohio

Mailing Address P.O. Box 1418

City Columbus State OH Zip Code 43216

Purpose of Disbursement
Contribution

Candidate Name
Lee Fisher

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District:

Transaction ID: D269603
Date of Disbursement

/ /

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Rhode Island Hope PAC

A.

Full Name (Last, First, Middle Initial)
Robin Carnahan For Senate

Transaction ID: D269604
Date of Disbursement

Mailing Address P.O. Box 50378

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City State Zip Code
Saint Louis MO 63105

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Robin Carnahan

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MO District:

B.

Full Name (Last, First, Middle Initial)
Friends Of Blanche Lincoln

Transaction ID: D269595
Date of Disbursement

Mailing Address P.O. Box 3197

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

City State Zip Code
Little Rock AR 72203

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Blanche Lincoln

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AR District: Runoff

C.

Full Name (Last, First, Middle Initial)
Charlie Melancon Campaign Committee, Inc.

Transaction ID: D269596
Date of Disbursement

Mailing Address P.O. Box 549

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

City State Zip Code
Napoleonville LA 70390

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Charlie Melancon

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: LA District:

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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**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 checked="" 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)
Rhode Island Hope PAC

A.	Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln	Transaction ID: D262727 Date of Disbursement 05 / 28 / 2010
	Mailing Address P.O. Box 3197	
	City Little Rock State AR Zip Code 72203	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name Blanche Lincoln Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type

B.	Full Name (Last, First, Middle Initial) Charlie Melancon Campaign Committee, Inc.	Transaction ID: D269597 Date of Disbursement 06 / 04 / 2010
	Mailing Address P.O. Box 549	
	City Napoleonville State LA Zip Code 70390	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Charlie Melancon Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C.	Full Name (Last, First, Middle Initial) Blumenthal For Senate	Transaction ID: D269599 Date of Disbursement 06 / 29 / 2010
	Mailing Address 777 Summer Street	
	City Stamford State CT Zip Code 06901	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Richard Blumenthal Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	47500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 / 22	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Rhode Island Hope PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal & Accounting Services
Mailing Address 607 14th Street, NW Suite 800			
City Washington	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period		Transaction ID: D268954	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
3089.01	0.00	3089.01	

1) SUBTOTALS This Period This Page (optional).....	3089.01
2) TOTALS This Period (last page this line number only).....	3089.01
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	3089.01