

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 08 01 2008 through 08 31 2008

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

Type or Print Name of Treasurer Brent Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 12 12 2008

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

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		17130.28
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	51940.44									
(c) Total Receipts (from Line 19)	43608.83	614338.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	95549.27	631468.79								
7. Total Disbursements (from Line 31)	63623.05	599542.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31926.22	31926.22								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	24350.00	450275.00
(i) Itemized (use Schedule A)	3480.00	125718.51
(ii) Unitemized	27830.00	575993.51
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5696.00	26261.00
(c) Other Political Committees (such as PACs)	33526.00	602254.51
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	2001.17
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)	10082.83	10082.83
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	10082.83	10082.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	43608.83	614338.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33526.00	604255.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2460.00	49520.51
(ii) Non-Federal Share.....	540.00	10870.35
(b) Other Federal Operating Expenditures.....	49810.63	434039.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	52810.63	494430.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	275.00
(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	275.00
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	10812.42	89837.33
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10812.42	89837.33
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	63623.05	599542.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63083.05	588672.22

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	33526.00	602254.51
34. Total Contribution Refunds (from Line 28(d))	0.00	275.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33526.00	601979.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52270.63	483559.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2001.17
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52270.63	481558.72

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

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

FOR LINE NUMBER: PAGE 6 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Brent Andersen

Mailing Address 11 Linda Avenue

City State Zip Code
Auburn MA 01501

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

Name of Employer
Energy Insulation Conserv-
ation Occupation
Operations Manager

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2008

Transaction ID: 80815.C170557

Amount of Each Receipt this Period
600.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert Avakian

Mailing Address 65 South Rd.

City State Zip Code
Bedford MA 01730

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

Name of Employer
Information Requested Occupation
Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2008

Transaction ID: 80815.C170572

Amount of Each Receipt this Period
300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Donna J. Barach

Mailing Address 387 River Rd.

City State Zip Code
Carlisle MA 01741

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

Name of Employer
At Home Occupation
none

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 05 / 2008

Transaction ID: 80815.C170548

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **1000.00**

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 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Fred Barrows

Mailing Address 370 Pratt St.

City Mansfield State MA Zip Code 02048

FEC ID number of contributing federal political committee. C

Name of Employer Barrows Insurance Occupation Ins. Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 20 / 2008
Transaction ID: 80822.C170630
Amount of Each Receipt this Period 300.00
Receipt

B. Full Name (Last, First, Middle Initial)
Doug Bennett

Mailing Address 22 Lily Street
DO NOT MAIL

City Nantucket State MA Zip Code 02554

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 80916.C170645
Amount of Each Receipt this Period 300.00
Receipt

C. Full Name (Last, First, Middle Initial)
Harvey Bines

Mailing Address 36 Clarke St

City Lexington State MA Zip Code 02421

FEC ID number of contributing federal political committee. C

Name of Employer Sullivan & Worcester Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 14 / 2008
Transaction ID: 80815.C170578
Amount of Each Receipt this Period 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 51

(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Robert Blair

Mailing Address P.O. Box 705

City State Zip Code
Rowley MA 01969

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 8

Transaction ID: 80819.C170615

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
John Braasch

Mailing Address 25 Page Road

City State Zip Code
Lincoln MA 01773

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

Name of Employer Information Requested Occupation Information Requested
Lahey Clinic Physician

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 8

Transaction ID: 80819.C170610

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Brian Burke

Mailing Address 125 Birch Hill Rd.

City State Zip Code
Stow MA 01775

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

Name of Employer Information Requested Occupation Information Requested
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: 80815.C170532

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

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 9 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Mary Burns

Mailing Address 90 Livingston Ave

City State Zip Code
Lowell MA 01851

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

Name of Employer Capital Associates Inc. Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 18 / 2008
Transaction ID: 80819.C170608
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
George Chianis

Mailing Address 273 Chelmsford St.

City State Zip Code
Chelmsford MA 01824

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 18 / 2008
Transaction ID: 80819.C170616
Amount of Each Receipt this Period: 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Darrell Crate

Mailing Address 890 Hale Street

City State Zip Code
Beverly MA 01915

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

Name of Employer Affiliated Managers Group Occupation CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7800.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 80916.C170646
Amount of Each Receipt this Period: 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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 / 51
(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			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Michael Crossen

Mailing Address 97 Whitmar Road

City State Zip Code
Barnstable MA 02635

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

Name of Employer Rubin & Rudman Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 80815.C170582

Amount of Each Receipt this Period 300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mark Crowley

Mailing Address 59 Boynton Road

City State Zip Code
Medford MA 02155

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 80815.C170574

Amount of Each Receipt this Period 300.00

Receipt

C.

Full Name (Last, First, Middle Initial)
John Cunningham

Mailing Address 11 Overlook Ridge Dr.
Apt. 36

City State Zip Code
Revere MA 02151

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 80815.C170584

Amount of Each Receipt this Period 300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 11 / 51
(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Gregory DAgostino

Mailing Address 10 Liberty Sq.
4th Floor

City Boston State MA Zip Code 02109

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 08 / 2008

Transaction ID: 80815.C170577

Amount of Each Receipt this Period 600.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Ronald Davy

Mailing Address 32 Marina Drive

City Hull State MA Zip Code 02045

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 80916.C170638

Amount of Each Receipt this Period 600.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Viriato DeMacedo

Mailing Address 54 Mountain Hill Rd.

City Plymouth State MA Zip Code 02360

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

Name of Employer Commonwealth of Massachusetts Occupation State Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2008

Transaction ID: 80819.C170599

Amount of Each Receipt this Period 300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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 12 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Richard Dohoney
Mailing Address 74 Blue Hill Road
City State Zip Code
Great Barrington MA 01230
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 14 / 2008
Transaction ID: 80815.C170580
Amount of Each Receipt this Period 300.00
Receipt

B. Full Name (Last, First, Middle Initial)
Peter Dulchinos
Mailing Address 17 Spaulding Rd.
City State Zip Code
Chelmsford MA 01824
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00
Date of Receipt 08 / 05 / 2008
Transaction ID: 80815.C170547
Amount of Each Receipt this Period 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Robert Dwyer
Mailing Address 496 Reed Rd.
City State Zip Code
Dartmouth MA 02747
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 14 / 2008
Transaction ID: 80815.C170583
Amount of Each Receipt this Period 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 650.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 13 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Robert Eno

Mailing Address 67 Webster Street #3

City Boston State MA Zip Code 02128

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

Name of Employer The Digital Printing Company Occupation Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.01

Date of Receipt 08 / 18 / 2008
Transaction ID: 80819.C170586
Amount of Each Receipt this Period 25.00
Receipt

B. Full Name (Last, First, Middle Initial)
Michelle Fahey

Mailing Address 100 Leisure Lane Apt. 95

City Stoneham State MA Zip Code 02180

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

Name of Employer None Occupation Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2008
Transaction ID: 80815.C170531
Amount of Each Receipt this Period 300.00
Receipt

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

Mailing Address 308 Rochdale St.

City Auburn State MA Zip Code 01501

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

Name of Employer Commonwealth of Massachusetts Occupation State Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2008
Transaction ID: 80815.C170540
Amount of Each Receipt this Period 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 14 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Charles Fuller

Mailing Address 33 High Ridge Road

City State Zip Code
Boxford MA 01921

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

Name of Employer Fraen Corp Occupation Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	8	/	2	0	0	8

Transaction ID: 80815.C170562

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gilbert Gonzalez

Mailing Address 20 Marsh Lane

City State Zip Code
Hyannis MA 02601

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	8	/	2	0	0	8

Transaction ID: 80815.C170573

Amount of Each Receipt this Period
300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Emery Haskell

Mailing Address 129 Wallace St.

City State Zip Code
Malden MA 02148

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

Name of Employer US Dept of State Occupation Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: 80815.C170525

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 15 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Jeffrey Horvitz		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
Mailing Address 65 West Street P.O. Box 5630-0512		Transaction ID: 80822.C170632
City Beverly	State MA	Zip Code 01915-0512
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self Employed	Occupation investor	Receipt
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) Amory Houghton, Jr.		Date of Receipt MM / DD / YYYY 08 / 18 / 2008
Mailing Address 80 East Market Street Suite 300		Transaction ID: 80819.C170588
City Corning	State NY	Zip Code 14830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

C.

Full Name (Last, First, Middle Initial) Jean Inman		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
Mailing Address PO Box 735		Transaction ID: 80815.C170556
City Stoughton	State MA	Zip Code 02072
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NECNE	Occupation Educator	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Linda Jewell

Mailing Address 11 Dover Circle

City State Zip Code
Franklin MA 02038

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2008

Transaction ID: 80819.C170609

Amount of Each Receipt this Period
100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Matthew Keswick

Mailing Address 231 Victory Road

City State Zip Code
North Quincy MA 02171

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

Name of Employer Keswick Consulting Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 80815.C170571

Amount of Each Receipt this Period
300.00

Receipt

C.

Full Name (Last, First, Middle Initial)
David Kopacz

Mailing Address PO Box 158

City State Zip Code
Belchertown MA 01007

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 80916.C170643

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Raymond Lauring

Mailing Address 23 Brigham Rd

City Worcester State MA Zip Code 01609

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2008
Transaction ID: 80819.C170587
Amount of Each Receipt this Period 150.00
Receipt

B. Full Name (Last, First, Middle Initial)
Deanna Lesser

Mailing Address 1 Kimball Court Apt. 410

City Woburn State MA Zip Code 01801-6441

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

Name of Employer Cambridge District Court Occupation State Court Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 08 / 18 / 2008
Transaction ID: 80819.C170623
Amount of Each Receipt this Period 50.00
Receipt

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

Mailing Address 600 Highland St.

City Holliston State MA Zip Code 01746

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

Name of Employer Commonwealth of Massachusetts Occupation State Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 80916.C170644
Amount of Each Receipt this Period 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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 18 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Robert Magovern
Mailing Address 144 Birch Hill Road
City Agawam State MA Zip Code 01001
FEC ID number of contributing federal political committee. **C**
Name of Employer Neighbor to Neighbor of America Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 80916.C170642
Amount of Each Receipt this Period 300.00
Receipt

B. Full Name (Last, First, Middle Initial)
Isaac Mass
Mailing Address 50 Linden Ave
City Greenfield State MA Zip Code 01301
FEC ID number of contributing federal political committee. **C**
Name of Employer US Army Occupation Sargent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 80916.C170639
Amount of Each Receipt this Period 300.00
Receipt

C. Full Name (Last, First, Middle Initial)
Cheryl McCarthy
Mailing Address 27 Forest St.
City Byfield State MA Zip Code 01922
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Unemployed
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 01 / 2008
Transaction ID: 80815.C170524
Amount of Each Receipt this Period 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 900.00
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 19 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Monica Medeiros

Mailing Address 3 Bay State Road

City State Zip Code
Melrose MA 02176

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

Name of Employer Real Estate Capital Solutions
Occupation mortgage consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 80815.C170569

Amount of Each Receipt this Period
300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Paul Noble

Mailing Address 110 Black Rock Drive

City State Zip Code
Hingham MA 02043

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

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2008

Transaction ID: 80815.C170543

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Tommasina Olson

Mailing Address 10 Bay State Rd.

City State Zip Code
Belmont MA 02478

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

Name of Employer life vest manual, inc.
Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2008

Transaction ID: 80819.C170625

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

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 20 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Frank Pedlow

Mailing Address 23 Ridgeway Lane

City State Zip Code
Boston MA 02114

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2008

Transaction ID: 80923.C170960

Amount of Each Receipt this Period
250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Guido Perera

Mailing Address 121 Old Concord Rd.

City State Zip Code
Lincoln MA 01773

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2008

Transaction ID: 80819.C170590

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
W. Mitt Romney

Mailing Address 171 Marsh St.

City State Zip Code
Belmont MA 02478

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 80815.C170542

Amount of Each Receipt this Period
600.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 21 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Alan Rubin

Mailing Address 3 Meadowview Lane

City State Zip Code
Westford MA 01886

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2008

Transaction ID: 80815.C170575

Amount of Each Receipt this Period
300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Richard Warren Russell

Mailing Address PO Box 638

City State Zip Code
Dover MA 02030

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2008

Transaction ID: 80815.C170520

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 7 Acorn St.

City State Zip Code
Boston MA 02108

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2008

Transaction ID: 80815.C170558

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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 22 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Robert A. Semonian		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 11 Howe Street DO NOT MAIL - DUP		Transaction ID: 80815.C170523
City Watertown	State MA	Zip Code 02472
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Improper Publications Inc.	Occupation Treasurer	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.

Full Name (Last, First, Middle Initial) Walter Shaw		Date of Receipt MM / DD / YYYY 08 / 18 / 2008
Mailing Address 709 Meadowcrest Circle		Transaction ID: 80819.C170596
City Ludlow	State MA	Zip Code 01056-1497
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Andrew Silinsh		Date of Receipt MM / DD / YYYY 08 / 18 / 2008
Mailing Address 2 Blacksmith Rd		Transaction ID: 80819.C170592
City Chelmsford	State MA	Zip Code 01824
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Fidelity Investments	Occupation Software Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	525.00
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 23 / 51
(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Julie Sprague		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 65 Commonwealth Avenue DO NOT CALL		Transaction ID: 80815.C170521
City Boston	State MA	Zip Code 02116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation decorator	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Thomas Stemberg		Date of Receipt MM / DD / YYYY 08 / 17 / 2008
Mailing Address 6 Alwyngton Road		Transaction ID: 80819.C170627
City Brookline	State MA	Zip Code 02467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Highland Capital Partners	Occupation Venture Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.

Full Name (Last, First, Middle Initial) George Tarvezian		Date of Receipt MM / DD / YYYY 08 / 18 / 2008
Mailing Address P.O. Box 496		Transaction ID: 80819.C170611
City Belmont	State MA	Zip Code 02478-0004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer The Tarvezian Group	Occupation investor	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)	▶	2350.00
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 24 / 51
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Michael Torrisi

Mailing Address 38 High Street

City State Zip Code
Andover MA 01810

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

Name of Employer Occupation
Torrisi & Torrisi LLC Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2008

Transaction ID: 80815.C170549

Amount of Each Receipt this Period
100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
David Tuerck

Mailing Address 11 Joan Drive

City State Zip Code
Quincy MA 02169

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

Name of Employer Occupation
Suffolk University Professor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2008

Transaction ID: 80819.C170606

Amount of Each Receipt this Period
200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Linda Vacon

Mailing Address 7 Pheasant Drive

City State Zip Code
Holyoke MA 01040-9634

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

Name of Employer Occupation
Auburn District Nursing Assoc Executive Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 80815.C170533

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 25 / 51
(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Victoria Whitney

Mailing Address 47 Sargent Road

City State Zip Code
Brookline MA 02445

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 80815.C170561

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joseph Wong

Mailing Address 205 Greendale Avenue

City State Zip Code
Needham MA 02492

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

Name of Employer None Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2008

Transaction ID: 80819.C170601

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Yaremchuk

Mailing Address 15 Smith Farm Trail

City State Zip Code
Lynnfield MA 01940

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

Name of Employer Self Employed Occupation Plastic Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 80815.C170560

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

TOTAL This Period (last page this line number only) ▶ **24350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 51
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) AstraZeneca PAC		Date of Receipt
	Mailing Address Paul Pereira 1800 Concord Pike		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Wilmington	State DE	Zip Code 19850
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 80819.C170628
	Name of Employer PAC		Occupation FEC ID: C00279455
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
			Receipt

B.	Full Name (Last, First, Middle Initial) Romney for President, Inc		Date of Receipt
	Mailing Address PO Box 55239		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Boston	State MA	Zip Code 02205
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 80916.C170633
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1061.00"/>	Amount of Each Receipt this Period <input type="text" value="696.00"/>
			In-Kind
			Fundraising list rental, party related, non FEA

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5696.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5696.00"/>

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Scr & Associates, LLC	Transaction ID: 80916.E10626 Date of Disbursement 08 / 01 / 2008
	Mailing Address 4 Leblanc Dr	
	City Danvers State MA Zip Code 01923-	Amount of Each Disbursement this Period 9105.00
	Purpose of Disbursement Fundraising Consulting 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) ▼
		FUNDRAISING CONSULTING

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 80916.E10633 Date of Disbursement 08 / 14 / 2008
	Mailing Address PO Box 2971	
	City Omaha State NE Zip Code 68103-	Amount of Each Disbursement this Period 170.27
	Purpose of Disbursement Cell Phone 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) ▼
		CELL PHONE

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 80917.E10665 Date of Disbursement 08 / 21 / 2008
	Mailing Address PO Box 2971	
	City Omaha State NE Zip Code 68103-	Amount of Each Disbursement this Period 142.88
	Purpose of Disbursement Cell Phone 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) ▼
		CELL PHONE

SUBTOTAL of Disbursements This Page (optional)	▶	9418.15
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts</p> <p>Mailing Address Landmark Center 401 Park Drive</p> <p>City Boston State MA Zip Code 02215-</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10623 Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 3163.44</p> <p>Category/Type HEALTH INSURANCE</p>
<p>B. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts</p> <p>Mailing Address Landmark Center 401 Park Drive</p> <p>City Boston State MA Zip Code 02215-</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80917.E10664 Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 3163.44</p> <p>Category/Type HEALTH INSURANCE</p>
<p>C. Full Name (Last, First, Middle Initial) Branders.com, Inc.</p> <p>Mailing Address 1850 Gateway Drive Suite 400</p> <p>City San Mateo State CA Zip Code 94404-</p> <p>Purpose of Disbursement Delegation Gifts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10625 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1189.64</p> <p>Category/Type DELEGATION GIFTS</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7516.52

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)

PAGE 29 / 51

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) DataMarks	Transaction ID: 80916.E10644 Date of Disbursement
	Mailing Address 37B Averill Street, PO. Box 68	<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City: Topsfield State: MA Zip Code: 01983-	Amount of Each Disbursement this Period
	Purpose of Disbursement: Mail Processing	<input type="text" value="1000.00"/>
	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) ▼
		MAIL PROCESSING

B.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 80916.E10631 Date of Disbursement
	Mailing Address PO Box 60036	<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City: Los Angeles State: CA Zip Code: 90060-0036	Amount of Each Disbursement this Period
	Purpose of Disbursement: Cable Service	<input type="text" value="91.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

C.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 80917.E10663 Date of Disbursement
	Mailing Address PO Box 60036	<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City: Los Angeles State: CA Zip Code: 90060-0036	Amount of Each Disbursement this Period
	Purpose of Disbursement: Cable Service	<input type="text" value="91.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1183.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80916.E10620 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period
	Purpose of Disbursement Express Mail	<input type="text" value="69.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

B.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80916.E10630 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period
	Purpose of Disbursement Express Mail	<input type="text" value="68.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

C.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80916.E10651 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period
	Purpose of Disbursement Express Mail	<input type="text" value="39.39"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

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 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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex) Mailing Address PO Box 371461 City Pittsburgh State PA Zip Code 15250- Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80917.E10662 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 9.50 EXPRESS MAIL
B.	Full Name (Last, First, Middle Initial) Guardian Guardian Mailing Address Boston Group Office 1 Liberty Square City Boston State MA Zip Code 02109- Purpose of Disbursement Dental Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80917.E10667 Date of Disbursement 08 / 01 / 2008 Amount of Each Disbursement this Period 499.75 DENTAL INSURANCE
C.	Full Name (Last, First, Middle Initial) Lyndsay Jones Mailing Address 16 Oval Road City Quincy State MA Zip Code 02170- Purpose of Disbursement Reimbursement for travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80916.E10612 Date of Disbursement 08 / 06 / 2008 Amount of Each Disbursement this Period 59.00 REIMBURSEMENT FOR TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶	568.25
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 80917.E10657 Date of Disbursement 08 / 21 / 2008
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 58.21
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement Reimbursement for travel and parking	REIMBURSEMENT FOR TRAVEL AND PARKING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 80916.E10632 Date of Disbursement 08 / 14 / 2008
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 600.00
	City Lynn State MA Zip Code 01902-	
	Purpose of Disbursement Accounting Services	ACCOUNTING SERVICES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 80916.E10652 Date of Disbursement 08 / 21 / 2008
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 500.00
	City Lynn State MA Zip Code 01902-	
	Purpose of Disbursement Accounting Services	ACCOUNTING SERVICES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1158.21
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 80917.E10666 Date of Disbursement 08 / 21 / 2008
	Mailing Address 43 Eastern Ave. Apt. 3	
	City Lynn State MA Zip Code 01902-	Amount of Each Disbursement this Period 550.00
	Purpose of Disbursement Accounting Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		ACCOUNTING SERVICES

B.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10614 Date of Disbursement 08 / 06 / 2008
	Mailing Address 187 Lewis Rd.	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 118.32
	Purpose of Disbursement Reimbursement for phone 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) ▼
		REIMBURSEMENT FOR PHONE

C.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10613 Date of Disbursement 08 / 06 / 2008
	Mailing Address 187 Lewis Rd.	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 96.46
	Purpose of Disbursement Reimbursement for travel and food 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) ▼
		REIMBURSEMENT FOR TRAVEL AND FOOD

SUBTOTAL of Disbursements This Page (optional)	764.78
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10646 Date of Disbursement 08 / 21 / 2008
	Mailing Address 187 Lewis Rd.	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 85.09
	Purpose of Disbursement Reimbursement for travel and parking	REIMBURSEMENT FOR TRAVEL AND PARKING
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10645 Date of Disbursement 08 / 21 / 2008
	Mailing Address 187 Lewis Rd.	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 164.56
	Purpose of Disbursement Reimbursement for phone	REIMBURSEMENT FOR PHONE
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Merchants Bankcard	Transaction ID: 80916.E10654 Date of Disbursement 08 / 01 / 2008
	Mailing Address Fleet Bank 100 Federal Street	
	City Boston State MA Zip Code 02110-	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Credit Card Fee	CREDIT CARD FEE
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	324.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Merchants Bankcard	Transaction ID: 80916.E10653 Date of Disbursement MM / DD / YYYY 08 / 01 / 2008
	Mailing Address Fleet Bank 100 Federal Street	Amount of Each Disbursement this Period 551.89
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Credit Card Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEE

B.	Full Name (Last, First, Middle Initial) Merchants Bankcard	Transaction ID: 80916.E10655 Date of Disbursement MM / DD / YYYY 08 / 05 / 2008
	Mailing Address Fleet Bank 100 Federal Street	Amount of Each Disbursement this Period 25.00
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Credit Card Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEE

C.	Full Name (Last, First, Middle Initial) mindShift Technologies, Inc.	Transaction ID: 80916.E10628 Date of Disbursement MM / DD / YYYY 08 / 14 / 2008
	Mailing Address PO Box 200105	Amount of Each Disbursement this Period 1636.00
	City Pittsburgh State PA Zip Code 15251-	
	Purpose of Disbursement Computer Networking	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		COMPUTER NETWORKING

SUBTOTAL of Disbursements This Page (optional)	▶	2212.89
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems <hr/> Mailing Address P.O. Box 7247-0322 <hr/> City Philadelphia State PA Zip Code 19170-0322 <hr/> Purpose of Disbursement Copier 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: 80916.E10629 Date of Disbursement 08 / 14 / 2008	Amount of Each Disbursement this Period 722.93 COPIER
B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems <hr/> Mailing Address P.O. Box 7247-0322 <hr/> City Philadelphia State PA Zip Code 19170-0322 <hr/> Purpose of Disbursement Copier 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: 80917.E10661 Date of Disbursement 08 / 21 / 2008	Amount of Each Disbursement this Period 722.93 COPIER
C.	Full Name (Last, First, Middle Initial) Communication Inc OBrien <hr/> Mailing Address PO Box 659 <hr/> City Wrentham State MA Zip Code 02093- <hr/> Purpose of Disbursement Phone System 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: 80916.E10627 Date of Disbursement 08 / 14 / 2008	Amount of Each Disbursement this Period 265.00 PHONE SYSTEM

SUBTOTAL of Disbursements This Page (optional) ▶

1710.86

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)

PAGE 37 / 51

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Ox-Eye Properties	Transaction ID: 80916.E10648 Date of Disbursement
	Mailing Address c/o Massey & Co. 85 Merrimac Street	<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Boston State MA Zip Code 02114-	Amount of Each Disbursement this Period
	Purpose of Disbursement Utilities	<input type="text" value="650.30"/>
	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) ▼
		UTILITIES

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80916.E10643 Date of Disbursement
	Mailing Address PO Box 8295	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Boston State MA Zip Code 02266-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Tax	<input type="text" value="2706.46"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAX

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80916.E10611 Date of Disbursement
	Mailing Address PO Box 8295	<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Boston State MA Zip Code 02266-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Fee	<input type="text" value="150.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL FEE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3507.54"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 51

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement 401k Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80917.E10668 Date of Disbursement 08 / 15 / 2008
	Amount of Each Disbursement this Period 160.00
	Category/ Type 401K FEE
	Purpose of Disbursement 401k Fee

B. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement Payroll Tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80916.E10642 Date of Disbursement 08 / 21 / 2008
	Amount of Each Disbursement this Period 2706.46
	Category/ Type PAYROLL TAX
	Purpose of Disbursement Payroll Tax

C. Full Name (Last, First, Middle Initial) Poland Spring Poland Spring Mailing Address Processing Center PO Box 52271 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement Bottled Water Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80916.E10650 Date of Disbursement 08 / 21 / 2008
	Amount of Each Disbursement this Period 132.20
	Category/ Type BOTTLED WATER
	Purpose of Disbursement Bottled Water

SUBTOTAL of Disbursements This Page (optional) ▶	2998.66
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)

PAGE 39 / 51

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) Mansfield Public Schools</p> <p>Mailing Address Building & Grounds Dept. 250 East St.</p> <p>City Mansfield State MA Zip Code 02048-</p> <p>Purpose of Disbursement Custodial Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10649 Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 240.00</p> <p>CUSTODIAL FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Romney for President, Inc</p> <p>Mailing Address PO Box 55239</p> <p>City Boston State MA Zip Code 02205-</p> <p>Purpose of Disbursement Fundraising list rental party related non FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.C170633IK Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 696.00</p> <p>IN KIND: FUNDRAISING LIST RENTAL PARTY RELATED NON FEA</p>
<p>C. Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address Steve Meyers 1283 Main Street</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement Direct Mail and Telemarketing - party related non FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10617 Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>DIRECT MAIL AND TELEMARKETING - PARTY RELATED NON FEA</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3936.00

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

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 80916.E10636 Date of Disbursement 08 / 22 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 5441.48
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing - party related non FEA	DIRECT MAIL AND TELEMARKETING - PARTY RELATED NON FEA
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 80916.E10637 Date of Disbursement 08 / 22 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 3883.35
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing - party related non FEA	DIRECT MAIL AND TELEMARKETING - PARTY RELATED NON FEA
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Staples, Inc.	Transaction ID: 80916.E10647 Date of Disbursement 08 / 21 / 2008
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 410.46
	City Des Moines State IA Zip Code 50368-9020	
	Purpose of Disbursement Office Supplies	OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	9735.29
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Company Stubblebine	Transaction ID: 80917.E10660 Date of Disbursement 08 / 21 / 2008
	Mailing Address One Cranberry Hill	Amount of Each Disbursement this Period 150.00
	City Lexington State MA Zip Code 02421-	
	Purpose of Disbursement Room Rental	Category/Type ROOM RENTAL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile	Transaction ID: 80916.E10618 Date of Disbursement 08 / 06 / 2008
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 158.43
	City Saint Louis State MO Zip Code 63179-	
	Purpose of Disbursement Phone Service	Category/Type PHONE SERVICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile	Transaction ID: 80917.E10659 Date of Disbursement 08 / 21 / 2008
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 158.43
	City Saint Louis State MO Zip Code 63179-	
	Purpose of Disbursement Phone Service	Category/Type PHONE SERVICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	466.86
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) Taj Boston</p> <p>Mailing Address 15 Arlington St.</p> <p>City Boston State MA Zip Code 02116-</p> <p>Purpose of Disbursement catering for party related fundraising - Non FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10616</p> <p>Date of Disbursement MM / DD / YYYY 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1289.20</p> <p>CATERING FOR PARTY RELATED FUNDRAISING - NON FEA</p>
<p>B. Full Name (Last, First, Middle Initial) Peter Torkildsen</p> <p>Mailing Address 1 Stony Brook Road</p> <p>City Chelmsford State MA Zip Code 01863-</p> <p>Purpose of Disbursement Reimbursement - see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10619</p> <p>Date of Disbursement MM / DD / YYYY 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 900.00</p> <p>REIMBURSEMENT - SEE BELOW</p>
<p>C. Full Name (Last, First, Middle Initial) JFK/New Chardon Stre Postmaster-</p> <p>Mailing Address 25 New Chardon Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement P. Torkildsen reimbursement for postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80916.E10622</p> <p>Date of Disbursement MM / DD / YYYY 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 900.00</p> <p>[MEMO ITEM] MEMO: P. TORKILDSEN REIMBURSEMENT FOR POSTAGE</p>

SUBTOTAL of Disbursements This Page (optional)	1289.20
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80916.E10621 Date of Disbursement 08 / 06 / 2008
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 563.40
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Reimbursement - see below	REIMBURSEMENT - SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) House Of Representatives Gift Shop	Transaction ID: 80916.E10624 Date of Disbursement 08 / 06 / 2008
	Mailing Address Longworth Building	Amount of Each Disbursement this Period 563.40
	City Washington State DC Zip Code 20515-	
	Purpose of Disbursement P. Torkildsen reimbursement for trinkets political memorabilia	[MEMO ITEM] MEMO: P. TORKILDSEN REIMBURSEMENT FOR TRINKETS POLITICAL MEMORABILIA
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 80916.E10615 Date of Disbursement 08 / 06 / 2008
	Mailing Address P.O. Box 1	Amount of Each Disbursement this Period 472.21
	City Worcester State MA Zip Code 01654-	
	Purpose of Disbursement Phone	PHONE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1035.61
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)

PAGE 44 / 51

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 80917.E10658 Date of Disbursement 08 / 21 / 2008
	Mailing Address P.O. Box 1	Amount of Each Disbursement this Period 604.86
	City Worcester State MA Zip Code 01654-	
	Purpose of Disbursement Phone	PHONE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 80916.E10634 Date of Disbursement 08 / 14 / 2008
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 168.50
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Reimbursement for postage and travel	REIMBURSEMENT FOR POSTAGE AND TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 80916.E10635 Date of Disbursement 08 / 14 / 2008
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 126.61
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Reimbursement for Travel	REIMBURSEMENT FOR TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

899.97

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

49805.63

**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)

PAGE 45 / 51

<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)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 80916.E10607 Date of Disbursement 08 / 07 / 2008
	Mailing Address 16 Oval Road	
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period 1256.04
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 80916.E10638 Date of Disbursement 08 / 21 / 2008
	Mailing Address 16 Oval Road	
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period 1256.04
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10608 Date of Disbursement 08 / 07 / 2008
	Mailing Address 187 Lewis Rd.	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 1088.57
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	3600.65
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 46 / 51

<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)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 80916.E10639 Date of Disbursement 08 / 21 / 2008
	Mailing Address 187 Lewis Rd.	Amount of Each Disbursement this Period 1088.57
	City Belmont State MA Zip Code 02478-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80916.E10609 Date of Disbursement 08 / 07 / 2008
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 1635.16
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80916.E10640 Date of Disbursement 08 / 21 / 2008
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 1635.16
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	4358.89
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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial) Robert Willington <hr/> Mailing Address 12 Arlington Street <hr/> City Reading State MA Zip Code 01867- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80916.E10610 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1426.44 PAYROLL
B. Full Name (Last, First, Middle Initial) Robert Willington <hr/> Mailing Address 12 Arlington Street <hr/> City Reading State MA Zip Code 01867- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80916.E10641 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1426.44 PAYROLL

SUBTOTAL of Disbursements This Page (optional) ►

2852.88

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

10812.42

**SCHEDULE H2 (FEC Form 3X)
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER
LINCOLN REAGAN DINNER

ACTIVITY IS:

- Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

- New Revised Same as Previously Reported

FEDERAL %

82.00%

NONFEDERAL %

18.00%

**Transaction ID:
H2181212.J63**

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

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Committee Mass Rep- ublican Stat 85 Me- rr	M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 8	10082.83

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		0.00	Transaction ID: HB80916.C170634
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) LINCOLN REAGAN DIN- NER	10082.83		Transaction ID: H380916.C170634
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		10082.83	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	0.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	10082.83
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)	10082.83

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
Edward Palleschi

Mailing Address
1 Ellis Rd.

City	State	Zip Code
Swampscott	MA	01907-

Purpose of Disbursement:
Fundraising consultancy for event

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

60390.86

Activity or Event Identifier:
LINCOLN REAGAN DINNER

Date 08 / 06 / 2008

Transaction ID: H480822.E10605

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2460.00		540.00		3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2460.00		540.00		3000.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2460.00		540.00		3000.00

Image# 28935173193

Form/Schedule: **F3XA**
Transaction ID:

All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided in order to meet best efforts policy.
