

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

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		14344.34
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	14344.34									
(c) Total Receipts (from Line 19)	96526.50	96526.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	110870.84	110870.84								
7. Total Disbursements (from Line 31)	82530.72	82530.72								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28340.12	28340.12								
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)	59317.50									

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	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

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	71950.00	71950.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	24466.50	24466.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	96416.50	96416.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	96416.50	96416.50
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)	110.00	110.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	96526.50	96526.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	96526.50	96526.50

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	69708.09	69708.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	69708.09	69708.09
22. Transfers to Affiliated/Other Party Committees.....	5000.00	5000.00
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	7822.63	7822.63
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	7822.63	7822.63
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	82530.72	82530.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	82530.72	82530.72

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)	96416.50	96416.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96416.50	96416.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	69708.09	69708.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	110.00	110.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69598.09	69598.09

Form/Schedule : **F3XA**

Transaction ID :

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED A CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY WAS REPORTED TO BE REPORTED ON SCHEDULES B, E, OR F. 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.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 54
(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)
Annalee Abelson

Mailing Address 26 Philips St.

City State Zip Code
Andover MA 01810

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

Name of Employer Occupation
Ophthalmic Research Associates Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 02 / 2008

Transaction ID: 80115.C166787

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mariann Appley

Mailing Address 2 Commonwealth Avenue

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation
Self Employed Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
01 / 02 / 2008

Transaction ID: 80115.C166793

Amount of Each Receipt this Period
200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Daniel Bathon

Mailing Address 23 Slocum Road

City State Zip Code
Lexington MA 02421

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

Name of Employer Occupation
Windspeed Ventures Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 04 / 2008

Transaction ID: 80115.C167083

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **6200.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Martin Begien	Date of Receipt MM / DD / YYYY 01 / 23 / 2008
	Mailing Address 407 Warren Street	Transaction ID: 80130.C167262
	City State Zip Code Brookline MA 02445	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1000.00	

B.	Full Name (Last, First, Middle Initial) George Bennett	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 712 Main St.	Transaction ID: 80130.C167295
	City State Zip Code Hingham MA 02043-3327	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 200.00	

C.	Full Name (Last, First, Middle Initial) Robert Brace	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 9 Jackson Pond	Transaction ID: 80115.C166886
	City State Zip Code Dedham MA 02026	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	1700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Edgar Bristol

Mailing Address 28 Union St

City State Zip Code
Foxborough MA 02035

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: 80115.C166794

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 28 Pinedale St.

City State Zip Code
Southbridge MA 01550

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

Name of Employer Hyde Group Inc Occupation Vice Chairman

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	8

Transaction ID: 80122.C167194

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lawrence Cohn

Mailing Address 45 Single Tree Road

City State Zip Code
Chestnut Hill MA 02467

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

Name of Employer Brigham & Womens Hospital Occupation Cardiac Surgeon

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	0	8

Transaction ID: 80130.C167278

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John Cornish
Mailing Address 106 Clyde St.
City State Zip Code
Newton MA 02467
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 ▼ 200.00
Date of Receipt 01 / 09 / 2008
Transaction ID: 80115.C167103
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Earle Craig
Mailing Address PO Box 2638
DO NOT MAIL
City State Zip Code
Midland TX 79702
FEC ID number of contributing federal political committee. **C**
Name of Employer Independent Oil/Gas Producer Occupation Self employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 01 / 30 / 2008
Transaction ID: 80130.C167386
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Michael Cronin
Mailing Address 72 Cliff Rd.
City State Zip Code
Weston MA 02493
FEC ID number of contributing federal political committee. **C**
Name of Employer Weston Presidio Occupation Venture Capitalist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 01 / 03 / 2008
Transaction ID: 80115.C166881
Amount of Each Receipt this Period 10000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 10450.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) John Danforth	Date of Receipt MM / DD / YYYY 01 / 02 / 2008
	Mailing Address 35 Farm Ln	Transaction ID: 80115.C166795
	City State Zip Code Westwood MA 02090	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Wesley Eaton	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 304 Brooksby Village Drive Unit 308	Transaction ID: 80130.C167301
	City State Zip Code Peabody MA 01960	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) David Eckert	Date of Receipt MM / DD / YYYY 01 / 04 / 2008
	Mailing Address 128 Boston Post Road	Transaction ID: 80115.C167086
	City State Zip Code Wayland MA 01778	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Iron Age Corp. Occupation President and CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3720.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John Emery
Mailing Address 69 Common St.
City State Zip Code
Dedham MA 02026
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SULLIVAN + WORCESTER LLP Lawyer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 150.00
Date of Receipt: 01 / 02 / 2008
Transaction ID: 80115.C166833
Amount of Each Receipt this Period: 150.00
Receipt

B. Full Name (Last, First, Middle Initial)
John Emery
Mailing Address 69 Common St.
City State Zip Code
Dedham MA 02026
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SULLIVAN + WORCESTER LLP Lawyer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 01 / 30 / 2008
Transaction ID: 80130.C167387
Amount of Each Receipt this Period: 150.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jay Forrester
Mailing Address 80 Deaconess Road Suite 442
City State Zip Code
Concord MA 01742
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 01 / 03 / 2008
Transaction ID: 80115.C166884
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Arnold Garrison

Mailing Address 181 Pine Ridge Rd.

City State Zip Code
Newton MA 02468

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 ▼ 500.00

Date of Receipt: 01 / 30 / 2008
Transaction ID: 80130.C167392
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
John Glaser

Mailing Address 13 Putter Drive

City State Zip Code
Acton MA 01720-4221

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

Name of Employer partners health care Occupation CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 01 / 02 / 2008
Transaction ID: 80115.C166796
Amount of Each Receipt this Period: 200.00
Receipt

C. Full Name (Last, First, Middle Initial)
Madeline Gregory

Mailing Address 300 Summer St
DO NOT CALL re EVENTS

City State Zip Code
Westwood MA 02090

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

Name of Employer At Home Occupation At Home (Housewife)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 01 / 22 / 2008
Transaction ID: 80122.C167260
Amount of Each Receipt this Period: 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Clark Griffith	Date of Receipt MM / DD / YYYY 01 / 16 / 2008
	Mailing Address 15 Lakeview St. P.O. Box 127	Transaction ID: 80122.C167227
	City State Zip Code Carver MA 02366	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 200.00	

B.	Full Name (Last, First, Middle Initial) Richard Hardy	Date of Receipt MM / DD / YYYY 01 / 15 / 2008
	Mailing Address 41 McGregory Rd.	Transaction ID: 80122.C167173
	City State Zip Code Sturbridge MA 01566	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Hyde Manufacturing Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 750.00	

C.	Full Name (Last, First, Middle Initial) Ralph Hawkins	Date of Receipt MM / DD / YYYY 01 / 16 / 2008
	Mailing Address 150 High St.	Transaction ID: 80122.C167192
	City State Zip Code Canton MA 02021	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Hawkins Aero Engineering Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 223 Rutledge Road

City Belmont State MA Zip Code 02478

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

Name of Employer Self Employed Occupation insurance agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 23 / 2008
Transaction ID: 80130.C167261
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Amory Houghton, Jr.

Mailing Address 80 East Market Street Suite 300

City Corning State NY Zip Code 14830

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 ▼ 1000.00

Date of Receipt 01 / 28 / 2008
Transaction ID: 80130.C167321
Amount of Each Receipt this Period 1000.00
Receipt

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

Mailing Address 4 Beacon St.

City Mattapoisett State MA Zip Code 02739

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 ▼ 200.00

Date of Receipt 01 / 31 / 2008
Transaction ID: 80131.C167493
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2200.00

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 11 Sunset Rd

City State Zip Code
Weston MA 02493

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

Name of Employer Ionics Inc. Occupation Chemical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 03 / 2008
Transaction ID: 80115.C166889
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Kurt Lanza

Mailing Address PO Box 2178

City State Zip Code
Littleton MA 01460

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 ▼ 230.00

Date of Receipt: 01 / 02 / 2008
Transaction ID: 80115.C166792
Amount of Each Receipt this Period: 230.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jonathan Lee

Mailing Address 35 Fisher Avenue

City State Zip Code
Brookline MA 02445

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

Name of Employer Lee Capital Investments Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 02 / 2008
Transaction ID: 80115.C166786
Amount of Each Receipt this Period: 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 5480.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.

Full Name (Last, First, Middle Initial) Bart Littlefield		Date of Receipt MM / DD / YYYY 01 / 04 / 2008
Mailing Address 3 Crowell Farm Road		Transaction ID: 80115.C167078
City Concord	State MA	Zip Code 01742
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer First Choice Student Travel	Occupation Travel Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Albert Merck		Date of Receipt MM / DD / YYYY 01 / 15 / 2008
Mailing Address 1010 Waltham St F-19		Transaction ID: 80122.C167172
City Lexington	State MA	Zip Code 02421-8048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15000.00
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 ▼ 15000.00	

C.

Full Name (Last, First, Middle Initial) Albert Merck		Date of Receipt MM / DD / YYYY 01 / 17 / 2008
Mailing Address 1010 Waltham St F-19		Transaction ID: 80122.C167232
City Lexington	State MA	Zip Code 02421-8048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -5000.00
Name of Employer Retired	Occupation Retired	Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

[MEMO ITEM]
A. Merck, transfer of excess contrib from fed to non-fed

SUBTOTAL of Receipts This Page (optional)	▶	15250.00
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 / 54
(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)
Ann Murphy

Mailing Address 65 Helen Street

City State Zip Code
Waltham MA 02452

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

Name of Employer Occupation
GPC/ONeill & Assoc. Vice President, PR Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2008

Transaction ID: 80130.C167474

Amount of Each Receipt this Period
250.00

Receipt

B.

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

Mailing Address 67 Carriage Way

City State Zip Code
Sudbury MA 01776

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2008

Transaction ID: 80130.C167322

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Howard Pearce

Mailing Address 37 Monument St.

City State Zip Code
Wenham MA 01984

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

Name of Employer Occupation
Oxford Global Resources Vice President of IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2008

Transaction ID: 80130.C167385

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2950.00**

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Lovett Peters

Mailing Address 81 Old Orchard Rd.

City State Zip Code
Newton MA 02467

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

Name of Employer Occupation
Pioneer Institute Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2008

Transaction ID: 80130.C167391

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frank Pickering

Mailing Address 18 Strawberry Hill Lane

City State Zip Code
Danvers MA 01923

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
01 / 17 / 2008

Transaction ID: 80122.C167239

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 44 Green Hill Rd.

City State Zip Code
Brookline MA 02445

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

Name of Employer Occupation
Harvard Business School Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 09 / 2008

Transaction ID: 80115.C167097

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **6200.00**

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Thomas Raphael

Mailing Address 666 Main St. Apt 412

City Winchester State MA Zip Code 01890

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 ▼ 200.00

Date of Receipt 01 / 09 / 2008
Transaction ID: 80115.C167104
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Arthur Ryan

Mailing Address 119 Mt. Pleasant Ave.

City Gloucester State MA Zip Code 01930

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 ▼ 2000.00

Date of Receipt 01 / 24 / 2008
Transaction ID: 80130.C167279
Amount of Each Receipt this Period 2000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Rosmarie Scully

Mailing Address 30 Somerset St.

City Belmont State MA Zip Code 02478

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

Name of Employer Scully Signal Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 25 / 2008
Transaction ID: 80130.C167302
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3200.00

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Jeffrey Sheehy
Mailing Address 330 South Main St.
City Andover State MA Zip Code 01810
FEC ID number of contributing federal political committee. **C**
Name of Employer Whittempre Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00
Date of Receipt 01 / 23 / 2008
Transaction ID: 80130.C167263
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Richard Sotell
Mailing Address 31 Lathrop Road
City Wellesley State MA Zip Code 02482
FEC ID number of contributing federal political committee. **C**
Name of Employer Kraematon Group Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 31 / 2008
Transaction ID: 80131.C167499
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Steinmann
Mailing Address 220 Boylston St.
City Boston State MA Zip Code 02116
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 ▼ 1000.00
Date of Receipt 01 / 25 / 2008
Transaction ID: 80130.C167300
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2200.00
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 / 54
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Phil Stevens

Mailing Address 6 Partridge Ln.

City State Zip Code
Burlington MA 01803

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

Name of Employer Alarm Safe, Inc. Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 4 / 2 0 0 8

Transaction ID: 80115.C166997

Amount of Each Receipt this Period
500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Donal Tobin

Mailing Address 55 Forbes Road

City State Zip Code
Westwood MA 02090-2221

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

Name of Employer The Gillette Co. Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 5 / 2 0 0 8

Transaction ID: 80130.C167289

Amount of Each Receipt this Period
500.00

Receipt

C.

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

Mailing Address 88 Brockton Ave

City State Zip Code
Haverhill MA 01830

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

Name of Employer Cedardale Inc. Occupation Owner/Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: 80115.C166790

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Peter Voss

Mailing Address One Charles Street South
Apt 7-H

City Boston State MA Zip Code 02116

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 ▼ 2000.00

Date of Receipt 01 / 30 / 2008
Transaction ID: 80130.C167389
Amount of Each Receipt this Period 2000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Jacques Wajsfelner

Mailing Address 298 Concord Rd.

City Weston State MA Zip Code 02493

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 ▼ 1000.00

Date of Receipt 01 / 18 / 2008
Transaction ID: 80122.C167248
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Constance V R White

Mailing Address 68 Beacon St.

City Boston State MA Zip Code 02108

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 02 / 2008
Transaction ID: 80115.C166827
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
E. Andrew Wilde

Mailing Address 1210 Greendale Ave.
Apt. E3

City State Zip Code
Needham MA 02492

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: 80130.C167327

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 235 Walker St. Apt 252

City State Zip Code
Lenox MA 01240

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: 80115.C166788

Amount of Each Receipt this Period
300.00

Receipt

C. Full Name (Last, First, Middle Initial)
George Young

Mailing Address 235 Walker St. Apt 252

City State Zip Code
Lenox MA 01240

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	8

Transaction ID: 80130.C167384

Amount of Each Receipt this Period
300.00

Receipt

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

TOTAL This Period (last page this line number only) ► **71950.00**

**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)

PAGE 25 / 54

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

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

A.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 80115.E10101 Date of Disbursement 01 / 03 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 2000.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Payment of debt for direct mail - party related non FEA	PAYMENT OF DEBT FOR DIRECT MAIL - 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: 80122.E10124 Date of Disbursement 01 / 07 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 2100.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing	DIRECT MAIL AND TELEMARKETING
	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) SCM Associates	Transaction ID: 80122.E10125 Date of Disbursement 01 / 07 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 7042.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing	DIRECT MAIL AND TELEMARKETING
	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)

11142.00

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)

PAGE 26 / 54

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

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

A.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 80122.E10126 Date of Disbursement 01 / 07 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 5500.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Payment of debt for direct mail - party related non FEA	PAYMENT OF DEBT FOR DIRECT MAIL - 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: 80122.E10139 Date of Disbursement 01 / 15 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 850.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing	DIRECT MAIL AND TELEMARKETING
	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) SCM Associates	Transaction ID: 80130.E10154 Date of Disbursement 01 / 22 / 2008
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 2391.83
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Payment of debt for direct mail - party related non FEA	PAYMENT OF DEBT FOR DIRECT MAIL - 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

8741.83

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) 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</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: 80218.E10175 Date of Disbursement 01 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 713.98</p> <p>DIRECT MAIL AND TELEMARKETING</p>
<p>B. Full Name (Last, First, Middle Initial) Patton Boggs LLP</p> <p>Mailing Address 2550 M. St. N.W.</p> <p>City Washington State DC Zip Code 20037-</p> <p>Purpose of Disbursement Legal 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: 80122.E10118 Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>LEGAL FEE</p>
<p>C. Full Name (Last, First, Middle Initial) Cambridge Offset Printing</p> <p>Mailing Address 56 Creighton Street</p> <p>City Cambridge State MA Zip Code 02140-</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10109 Date of Disbursement 01 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 4630.01</p> <p>PRINTING</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6843.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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) Cambridge Offset Printing	Transaction ID: 80122.E10144 Date of Disbursement
	Mailing Address 56 Creighton Street	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Cambridge State MA Zip Code 02140-	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="630.00"/>
	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) ▼
		PRINTING

B.	Full Name (Last, First, Middle Initial) Cambridge Offset Printing	Transaction ID: 80130.E10159 Date of Disbursement
	Mailing Address 56 Creighton Street	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Cambridge State MA Zip Code 02140-	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="829.50"/>
	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) ▼
		PRINTING

C.	Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 80115.E10108 Date of Disbursement
	Mailing Address 39 Old Colony Ave.	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Boston State MA Zip Code 02127-	Amount of Each Disbursement this Period
	Purpose of Disbursement Storage	<input type="text" value="319.00"/>
	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) ▼
		STORAGE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1778.50"/>
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)

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

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

A.	Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 80130.E10156 Date of Disbursement 01 / 22 / 2008
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 319.00
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement Storage	Category/Type STORAGE
	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) Css Castle Self-Storage	Transaction ID: 80218.E10176 Date of Disbursement 01 / 28 / 2008
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 50.00
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement Storage	Category/Type STORAGE
	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) CPMA, Inc.	Transaction ID: 80218.E10174 Date of Disbursement 01 / 22 / 2008
	Mailing Address 84 Prescott St. Suite 21	Amount of Each Disbursement this Period 2500.00
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement Political Consulting	Category/Type POLITICAL CONSULTING
	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)	2869.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Hui Jojo Deng	Transaction ID: 80115.E10104 Date of Disbursement 01 / 03 / 2008
	Mailing Address 117 Beaconsfield Road	Amount of Each Disbursement this Period 363.00
	City Brookline State MA Zip Code 02445-	
	Purpose of Disbursement Accounting Service 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 SERVICE

B.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80115.E10106 Date of Disbursement 01 / 03 / 2008
	Mailing Address PO Box 371461	Amount of Each Disbursement this Period 31.52
	City Pittsburgh State PA Zip Code 15250-	
	Purpose of Disbursement Express Mail 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: 80122.E10142 Date of Disbursement 01 / 15 / 2008
	Mailing Address PO Box 371461	Amount of Each Disbursement this Period 55.84
	City Pittsburgh State PA Zip Code 15250-	
	Purpose of Disbursement Express Mail 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) ▶

450.36

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 80218.E10171 Date of Disbursement 01 / 28 / 2008	
	Mailing Address PO Box 371461		
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period	49.84
	Purpose of Disbursement Express Mail 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) Fleet Bank	Transaction ID: 80219.E10183 Date of Disbursement 01 / 31 / 2008	
	Mailing Address 100 Federal Street		
	City Boston State MA Zip Code 02110-	Amount of Each Disbursement this Period	153.00
	Purpose of Disbursement Bank Service charge - excess transaction fee 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) ▼	BANK SERVICE CHARGE - EXCESS TRANSACTION FEE
C.	Full Name (Last, First, Middle Initial) Guardian Guardian	Transaction ID: 80115.E10085 Date of Disbursement 01 / 03 / 2008	
	Mailing Address Boston Group Office 1 Liberty Square		
	City Boston State MA Zip Code 02109-	Amount of Each Disbursement this Period	408.56
	Purpose of Disbursement Insurance Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	INSURANCE

SUBTOTAL of Disbursements This Page (optional)	611.40
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) HPH Inc. Harvard Pilgram Heal <hr/> Mailing Address 1200 Crown Colony Dr. <hr/> City Quincy State MA Zip Code 02169- <hr/> Purpose of Disbursement Health Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80115.E10105 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2064.86 <hr/> HEALTH INSURANCE
B.	Full Name (Last, First, Middle Initial) HPH Inc. Harvard Pilgram Heal <hr/> Mailing Address 1200 Crown Colony Dr. <hr/> City Quincy State MA Zip Code 02169- <hr/> Purpose of Disbursement Health Insurance 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: 80130.E10155 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2064.86 <hr/> HEALTH INSURANCE
C.	Full Name (Last, First, Middle Initial) Intranets.Com Intranets.Com <hr/> Mailing Address PO Box 414725 <hr/> City Boston State MA Zip Code 02241-4725 <hr/> Purpose of Disbursement Computer Server 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: 80218.E10166 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1279.46 <hr/> COMPUTER SERVER

SUBTOTAL of Disbursements This Page (optional) ▶

5409.18

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80130.E10149</p> <p>Date of Disbursement 01 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 278.00</p> <p>REIMBURSEMENT: SEE BELOW</p>
<p>B. Full Name (Last, First, Middle Initial) Delta Airline</p> <p>Mailing Address web address only- www.delta.com</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement L. Jones Reimbursement for Airfair</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80130.E10150</p> <p>Date of Disbursement 01 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 219.00</p> <p>[MEMO ITEM] MEMO: L. JONES REIMBURSEMENT FOR AIRFAIR</p>
<p>C. Full Name (Last, First, Middle Initial) Lexis-Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-</p> <p>Purpose of Disbursement Payment of debt for research party related</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10102</p> <p>Date of Disbursement 01 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PAYMENT OF DEBT FOR RESEARCH PARTY RELATED</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1278.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) mindShift Technologies, Inc.	Transaction ID: 80122.E10117 Date of Disbursement 01 / 07 / 2008
	Mailing Address PO Box 200105	Amount of Each Disbursement this Period 696.00
	City Pittsburgh State PA Zip Code 15251-	
	Purpose of Disbursement Payment of debt for IT Support party related non fea	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAYMENT OF DEBT FOR IT SUPPORT PARTY RELATED NON FEA
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems	Transaction ID: 80115.E10103 Date of Disbursement 01 / 03 / 2008
	Mailing Address P.O. Box 7247-0322	Amount of Each Disbursement this Period 1509.54
	City Philadelphia State PA Zip Code 19170-0322	
	Purpose of Disbursement Copier Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	COPIER RENTAL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems	Transaction ID: 80122.E10140 Date of Disbursement 01 / 15 / 2008
	Mailing Address P.O. Box 7247-0322	Amount of Each Disbursement this Period 730.51
	City Philadelphia State PA Zip Code 19170-0322	
	Purpose of Disbursement Copier rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	COPIER RENTAL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2936.05
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Ox-Eye Properties</p> <p>Mailing Address c/o Massey & Co. 85 Merrimac Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement Rent and Utility</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80115.E10100</p> <p>Date of Disbursement 01 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 4352.18</p> <p>RENT AND UTILITY</p>
<p>B. Full Name (Last, First, Middle Initial) Ox-Eye Properties</p> <p>Mailing Address c/o Massey & Co. 85 Merrimac Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement Rent</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: 80122.E10114</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 3965.00</p> <p>RENT</p>
<p>C. Full Name (Last, First, Middle Initial) Ox-Eye Properties</p> <p>Mailing Address c/o Massey & Co. 85 Merrimac Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement Rent</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: 80218.E10173</p> <p>Date of Disbursement 01 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 3695.00</p> <p>RENT</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12012.18

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80122.E10132 Date of Disbursement 01 / 10 / 2008
	Amount of Each Disbursement this Period 2129.91 Category/Type PAYROLL TAXES

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-401 K Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80122.E10131 Date of Disbursement 01 / 10 / 2008
	Amount of Each Disbursement this Period 961.54 Category/Type PAYROLL-401 K

C. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement Payroll-401 K Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80130.E10164 Date of Disbursement 01 / 24 / 2008
	Amount of Each Disbursement this Period 1153.85 Category/Type PAYROLL-401 K

SUBTOTAL of Disbursements This Page (optional) ▶	4245.30
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 80130.E10163 Date of Disbursement 01 / 24 / 2008
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 2288.71
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) JFK/New Chardon Stre Postmaster-	Transaction ID: 80122.E10145 Date of Disbursement 01 / 17 / 2008
	Mailing Address 25 New Chardon Street	Amount of Each Disbursement this Period 500.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Postage	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) ▼
		POSTAGE

C.	Full Name (Last, First, Middle Initial) Jody's Quik Print	Transaction ID: 80122.E10116 Date of Disbursement 01 / 07 / 2008
	Mailing Address P.O. Box 1068	Amount of Each Disbursement this Period 111.19
	City Middleton State MA Zip Code 01949-	
	Purpose of Disbursement Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING

SUBTOTAL of Disbursements This Page (optional)

2899.90

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 38 / 54

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

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

A.	Full Name (Last, First, Middle Initial) Jody's Quik Print	Transaction ID: 80122.E10141 Date of Disbursement 01 / 15 / 2008
	Mailing Address P.O. Box 1068	
	City Middleton State MA Zip Code 01949-	Amount of Each Disbursement this Period 1071.90
	Purpose of Disbursement Printing Candidate Name	Category/Type PRINTING
	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) RIM Research In Motion	Transaction ID: 80122.E10122 Date of Disbursement 01 / 07 / 2008
	Mailing Address 122 West John Caprenter Parkway	
	City Irving State TX Zip Code 75039-	Amount of Each Disbursement this Period 21.45
	Purpose of Disbursement Research Candidate Name	Category/Type RESEARCH
	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) Staples, Inc.	Transaction ID: 80115.E10095 Date of Disbursement 01 / 03 / 2008
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	
	City Des Moines State IA Zip Code 50368-9020	Amount of Each Disbursement this Period 214.41
	Purpose of Disbursement Office Supplies Candidate Name	Category/Type OFFICE SUPPLIES
	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)	▶	1307.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Staples, Inc.	Transaction ID: 80218.E10172 Date of Disbursement 01 / 28 / 2008
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 373.43
	City Des Moines	State IA
	Zip Code 50368-9020	Category/ Type
	Purpose of Disbursement Office Supplies	OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SM Corp Sylvester Management	Transaction ID: 80122.E10127 Date of Disbursement 01 / 08 / 2008
	Mailing Address PO box 986	Amount of Each Disbursement this Period 500.00
	City Irmo	State SC
	Zip Code 29063-	Category/ Type
	Purpose of Disbursement Conference Fee	CONFERENCE 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:	

C.	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile	Transaction ID: 80122.E10123 Date of Disbursement 01 / 07 / 2008
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 437.61
	City Saint Louis	State MO
	Zip Code 63179-	Category/ Type
	Purpose of Disbursement Phone Services	PHONE SERVICES
	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)	▶	1311.04
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. 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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80122.E10119</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1349.49</p> <p>REIMBURSEMENT: SEE BELOW</p>
<p>B. 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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80314.E10260</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1349.49</p> <p>[MEMO ITEM] MEMO: P.TORKILDSEN REIMBURSEMENT FOR POSTAGE</p>
<p>C. 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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80130.E10151</p> <p>Date of Disbursement 01 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 2560.24</p> <p>REIMBURSEMENT: SEE BELOW</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3909.73

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
JFK/New Chardon Stre Postmaster-

Mailing Address 25 New Chardon Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
P. Torkildsens Reimbursement for Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80130.E10153
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: P. TORKILDSSENS REIMBURSEMENT FOR POSTAGE

B. Full Name (Last, First, Middle Initial)
Verizon Internet Services

Mailing Address PO Box 101096

City Atlanta State GA Zip Code 30392-

Purpose of Disbursement
P. Torkildsens Reimbursement for Internet Service

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80130.E10152
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: P. TORKILDSSENS REIMBURSEMENT FOR INTERNET SERVICE

C. Full Name (Last, First, Middle Initial)
Peter Torkildsen

Mailing Address 1 Stony Brook Road

City Chelmsford State MA Zip Code 01863-

Purpose of Disbursement
Reimbursement: See Below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80218.E10168
Date of Disbursement

/ /

Amount of Each Disbursement this Period

REIMBURSEMENT: SEE BELOW

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

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

<p>A. Full Name (Last, First, Middle Initial) US House of Representative</p> <p>Mailing Address Long Worth BLDG</p> <p>City Washington State DC Zip Code 20515-</p> <p>Purpose of Disbursement P.Torkildsenss Reimbursement for Gift to Donors</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80218.E10170</p> <p>Date of Disbursement 01 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 297.18</p> <p>[MEMO ITEM] MEMO: P.TORKILDSSENSS REIMBURSEMENT FOR GIFT TO DONORS</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Internet Services</p> <p>Mailing Address PO Box 101096</p> <p>City Atlanta State GA Zip Code 30392-</p> <p>Purpose of Disbursement P.Torkildsens Reimbursement for Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80218.E10169</p> <p>Date of Disbursement 01 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 767.62</p> <p>[MEMO ITEM] MEMO: P.TORKILDSSENS REIMBURSEMENT FOR INTERNET SERVICE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 1</p> <p>City Worcester State MA Zip Code 01654-</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80122.E10138</p> <p>Date of Disbursement 01 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 402.91</p> <p>PHONE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

402.91

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

69213.93

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
A. Merck transfer of excess contrib from fed to non-fed

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80122.E10136

Date of Disbursement

01 / 17 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Bruce Harrison	Transaction ID: 80122.E10115
	Mailing Address 101 Elm St	Date of Disbursement 01 / 07 / 2008
	City Wakefield State MA Zip Code 01880-	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Payroll-Administration Candidate Name	PAYROLL-ADMINISTRATION
	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) Lyndsay Jones	Transaction ID: 80122.E10128
	Mailing Address 16 Oval Road	Date of Disbursement 01 / 10 / 2008
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period 1238.63
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Lyndsay Jones	Transaction ID: 80130.E10160
	Mailing Address 16 Oval Road	Date of Disbursement 01 / 24 / 2008
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period 1260.12
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) ▶

3498.75

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80122.E10129 Date of Disbursement 01 / 10 / 2008
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 681.91
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Peter Torkildsen	Transaction ID: 80130.E10161 Date of Disbursement 01 / 24 / 2008
	Mailing Address 1 Stony Brook Road	Amount of Each Disbursement this Period 805.75
	City Chelmsford State MA Zip Code 01863-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 80122.E10130 Date of Disbursement 01 / 10 / 2008
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 1405.70
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	2893.36
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City State Zip Code
Reading MA 01867-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80130.E10162

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1430.52

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1430.52

TOTAL This Period (last page this line number only)

7822.63

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates			Nature of Debt (Purpose): Payment of debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street			
City	State	ZIP Code	
Dublin	NH	03444-	

Outstanding Balance Beginning This Period		Transaction ID: LS80115.E10101	
9891.83			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	9891.83	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates			Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street			
City	State	ZIP Code	
Dublin	NH	03444-	

Outstanding Balance Beginning This Period		Transaction ID: LS90508.E11245	
5311.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	5311.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates			Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street			
City	State	ZIP Code	
Dublin	NH	03444-	

Outstanding Balance Beginning This Period		Transaction ID: LS90508.E11247	
9980.45			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	9980.45	

1) SUBTOTALS This Period This Page (optional).....	▶	15291.45
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 48 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period <input type="text" value="3814.75"/>	Transaction ID: LS90513.E11249	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3814.75"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period <input type="text" value="3909.25"/>	Transaction ID: LS90513.E11248	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3909.25"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period <input type="text" value="15.37"/>	Transaction ID: LS90513.E11251	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.37"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="7739.37"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates			Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street			
City Dublin	State NH	ZIP Code 03444-	

Outstanding Balance Beginning This Period		Transaction ID: LS90513.E11254	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
13.11	0.00	13.11	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates			Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street			
City Dublin	State NH	ZIP Code 03444-	

Outstanding Balance Beginning This Period		Transaction ID: LS90508.E11237	
9351.63			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	9351.63	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period		Transaction ID: LS90513.E11275	
250.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	250.00	

1) SUBTOTALS This Period This Page (optional).....	▶	9614.74
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Payment of debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		Transaction ID: LS80115.E10102	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		Transaction ID: LS90513.E11277	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1250.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENIlsson ENIlsson			Nature of Debt (Purpose): Original debt for IT support party related non fea
Mailing Address 6 Depot Street			
City Westford	State MA	ZIP Code 01886-	

Outstanding Balance Beginning This Period <input type="text" value="1252.00"/>		Transaction ID: LS90513.E11301	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1252.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2752.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENIlssoN ENIlsson			Nature of Debt (Purpose): Original debt for IT support party related non fea
Mailing Address 6 Depot Street			
City	State	ZIP Code	
Westford	MA	01886-	

Outstanding Balance Beginning This Period <input type="text" value="360.00"/>		Transaction ID: LS90513.E11302	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="360.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENIlssoN ENIlsson			Nature of Debt (Purpose): Original debt for IT support party related non fea
Mailing Address 6 Depot Street			
City	State	ZIP Code	
Westford	MA	01886-	

Outstanding Balance Beginning This Period <input type="text" value="411.94"/>		Transaction ID: LS90513.E11303	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="411.94"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Garage Government Center			Nature of Debt (Purpose): Original debt for parking party related non fea
Mailing Address 50 New Sudbury Street			
City	State	ZIP Code	
Boston	MA	02114-	

Outstanding Balance Beginning This Period <input type="text" value="640.00"/>		Transaction ID: LS90513.E11296	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="640.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1411.94"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Garage Government Center			Nature of Debt (Purpose): Original debt for parking party related non fea
Mailing Address 50 New Sudbury Street			
City	State	ZIP Code	
Boston	MA	02114-	

Outstanding Balance Beginning This Period		Transaction ID: LS90513.E11295	
640.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	640.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Garage Government Center			Nature of Debt (Purpose): Original debt for parking party related non fea
Mailing Address 50 New Sudbury Street			
City	State	ZIP Code	
Boston	MA	02114-	

Outstanding Balance Beginning This Period		Transaction ID: LS90513.E11300	
640.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	640.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Payment of debt for IT Support party related non fea
Mailing Address PO Box 200105			
City	State	ZIP Code	
Pittsburgh	PA	15251-	

Outstanding Balance Beginning This Period		Transaction ID: LS80122.E10117	
696.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	696.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1280.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Original debt for IT Support party related non fea
Mailing Address PO Box 200105			
City Pittsburgh	State PA	ZIP Code 15251-	

Outstanding Balance Beginning This Period <input type="text" value="1652.00"/>		Transaction ID: LS90513.E11289	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1652.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Original debt for IT Support party related non fea
Mailing Address PO Box 200105			
City Pittsburgh	State PA	ZIP Code 15251-	

Outstanding Balance Beginning This Period <input type="text" value="1652.00"/>		Transaction ID: LS90513.E11290	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1652.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Original debt for IT Support party related non fea
Mailing Address PO Box 200105			
City Pittsburgh	State PA	ZIP Code 15251-	

Outstanding Balance Beginning This Period <input type="text" value="1652.00"/>		Transaction ID: LS90513.E11291	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1652.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4956.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Original debt for IT Support party related non fea
Mailing Address PO Box 200105			
City Pittsburgh	State PA	ZIP Code 15251-	

Outstanding Balance Beginning This Period <input type="text" value="1636.00"/>		Transaction ID: LS90513.E11294	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1636.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor mindShift Technologies, Inc.			Nature of Debt (Purpose): Original debt for IT Support party related non fea
Mailing Address PO Box 200105			
City Pittsburgh	State PA	ZIP Code 15251-	

Outstanding Balance Beginning This Period <input type="text" value="1636.00"/>		Transaction ID: LS90513.E11292	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1636.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Communication, Inc. Majority			Nature of Debt (Purpose): Original Debt for FEA Get Out the Vote Mailing
Mailing Address 274 Marconi Blvd. Suite 260			
City Columbus	State OH	ZIP Code 43215-	

Outstanding Balance Beginning This Period <input type="text" value="13000.00"/>		Transaction ID: LS90508.E11226	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="16272.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="59317.50"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="59317.50"/>