

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

ADDRESS (number and street) **26 Hilton Road**
 Check if different than previously reported. (ACC) **Warwick RI 02889-2930**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00397067 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2019 through / / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer **McGovern, Thomas, P., Mr.,**

Signature of Treasurer **McGovern, Thomas, P., Mr.,** [Electronically Filed] Date / / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="40108.85"/>	<input type="text" value="40108.85"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="40108.85"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20000.00"/>	<input type="text" value="20000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="60108.85"/>	<input type="text" value="60108.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20000.00"/>	<input type="text" value="20000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="40108.85"/>	<input type="text" value="40108.85"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	15000.00	15000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15000.00	15000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20000.00	20000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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)).....▶	20000.00	20000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20000.00	20000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	20000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20000.00	20000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20000.00	20000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20000.00	20000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	20000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<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)
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

A. Townsend, Alison, K., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 63 Alfred Drowne Road

City Barrington	State RI	Zip Code 02806
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2019

Transaction ID : SA11AI.4781

Amount of Each Receipt this Period
5000.00

Memo Item

B. Townsend, Charles, C., Mr., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 63 Alfred Drowne Road

City Barrington	State RI	Zip Code 02806
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Aloha Partners	Occupation (for Individual) Executive
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2019

Transaction ID : SA11AI.4780

Amount of Each Receipt this Period
5000.00

Memo Item

C. Weiss, Diane, N., Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 S Ocean Blvd
Apt 1601

City Boca Raton	State FL	Zip Code 33432-8271
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Philanthropist
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2019

Transaction ID : SA11AI.4783

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City FALLS CHURCH State VA Zip Code 22042

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11C.4782

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts 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 checked="" type="checkbox"/> 23	<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)
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

A. ANDY KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 211

City MARLTON State NJ Zip Code 08053

Purpose of Disbursement Category/Type

Candidate Name
ANDY KIM FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 03

Date of Disbursement: 06 / 27 / 2019

FEC Identification Number: **C** C00648220
Transaction ID : **SB23.4770**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CHRISSEY HOULAHAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 222

City DEVON State PA Zip Code 19333

Purpose of Disbursement Category/Type

Candidate Name
CHRISSEY HOULAHAN FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: PA District: 06

Date of Disbursement: 06 / 27 / 2019

FEC Identification Number: **C** C00637371
Transaction ID : **SB23.4776**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 430 SOUTH CAPITOL STREET, SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2019

FEC Identification Number: **C**
Transaction ID : **SB23.4764**
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 430 SOUTH CAPITOL STREET, SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB23.4766

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 430 SOUTH CAPITOL STREET, SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB23.4769

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. ELISSA SLOTKIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 244

City HOLLY State MI Zip Code 48442

Purpose of Disbursement

Candidate Name
ELISSA SLOTKIN FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District: 08

Date of Disbursement: 06 / 27 / 2019

FEC Identification Number: C C00650150

Transaction ID : SB23.4772

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)

Full Name (Last, First, Middle Initial)

A. JASON CROW FOR CONGRESS

Mailing Address PO BOX 32145

City: AURORA State: CO Zip Code: 80041

Purpose of Disbursement

Candidate Name
JASON CROW FOR CONGRESS

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: CO District: 06

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2019

FEC Identification Number

C 000637363

Transaction ID : SB23.4774

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LORI TRAHAN FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1161

City: LOWELL State: MA Zip Code: 01853

Purpose of Disbursement

Candidate Name
LORI TRAHAN FOR CONGRESS COMMITTEE

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: MA District: 03

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2019

FEC Identification Number

C 000655647

Transaction ID : SB23.4778

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2000.00

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

20000.00