

**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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">11950.90</td></tr></table>	11950.90
Y	Y	Y	Y									
2	0	0	7									
11950.90												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">3113.29</td></tr></table>	3113.29										
3113.29												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">33181.00</td></tr></table>	33181.00	<table border="1" style="width: 100%;"><tr><td align="right">487900.36</td></tr></table>	487900.36								
33181.00												
487900.36												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">36294.29</td></tr></table>	36294.29	<table border="1" style="width: 100%;"><tr><td align="right">499851.26</td></tr></table>	499851.26								
36294.29												
499851.26												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">33933.35</td></tr></table>	33933.35	<table border="1" style="width: 100%;"><tr><td align="right">497490.32</td></tr></table>	497490.32								
33933.35												
497490.32												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">2360.94</td></tr></table>	2360.94	<table border="1" style="width: 100%;"><tr><td align="right">2360.94</td></tr></table>	2360.94								
2360.94												
2360.94												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	29200.00	346500.00
(i) Itemized (use Schedule A)	2670.00	105584.17
(ii) Unitemized	31870.00	452084.17
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	29351.73
(c) Other Political Committees (such as PACs)	31870.00	481435.90
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1311.00	4214.24
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	2250.22
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))	33181.00	487900.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33181.00	487900.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	26992.25	328856.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	26992.25	328856.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	35746.73
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	6941.10	132887.52
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	6941.10	132887.52
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33933.35	497490.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33933.35	497490.32

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)	31870.00	481435.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31870.00	481435.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26992.25	328856.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	1311.00	4214.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25681.25	324641.83

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial)
Joseph S. Annese

Mailing Address 62 Collier Road

City State Zip Code
Scituate MA 02066

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166462

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Leon Asadoorian

Mailing Address 40 Lowell Road

City State Zip Code
Salem NH 03079

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 ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: 71015.C166449

Amount of Each Receipt this Period
400.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edward Bamford

Mailing Address 31 Indian Trl

City State Zip Code
Scituate MA 02066

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

Transaction ID: 71015.C166455

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 26
	<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)
Stephen Binder

Mailing Address PO Box 286

City Lincoln State MA Zip Code 01773

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

Name of Employer Fidelity Investments Occupation Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: 71015.C166471

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elizabeth Burns

Mailing Address 90 Livingston Street

City Lowell State MA Zip Code 01851

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 ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71113.C166479

Amount of Each Receipt this Period
5000.00

Receipt

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

Mailing Address 90 Livingstone Ave

City Lowell State MA Zip Code 01851

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

Name of Employer Commonwealth of Massachusetts Occupation Ex.Dir.Outdoor Ad.Br

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C166428

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	9500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 26
	<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)
John Cabot

Mailing Address 1 Tucks Point Road

City State Zip Code
Manchester MA 01944

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 ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71113.C166487

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Bradford Caron

Mailing Address 12 Barstow Avenue

City State Zip Code
Norwell MA 02061

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166461

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Charles Colbert

Mailing Address 90 Spencer Ave

City State Zip Code
Chelsea MA 02150

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

Name of Employer The Chappy Corp. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166450

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 26
	<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)
William Frothingham

Mailing Address 117 School St

City State Zip Code
Manchester MA 01944

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C166431

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Timothy Gendron

Mailing Address 60 Cross Road

City State Zip Code
Lunenburg MA 01462

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

Name of Employer Tims Fabrications Inc. Occupation Construction

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166451

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Grasseschi

Mailing Address 44 Simmonds Hill Road

City State Zip Code
Hubbardston MA 01452

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166460

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 26
	<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)
Wayne Griffin

Mailing Address 2 Briar Lane

City State Zip Code
Medway MA 02053

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

Name of Employer
wayne J Griffin Electric Inc.

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166453

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 21 Circuit Ave

City State Zip Code
Scituate MA 02066

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

Name of Employer
Sagamore Plumbing & Heating Inc.

Occupation
Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166459

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Hazen

Mailing Address 17 College View Hts

City State Zip Code
South Hadley MA 01075

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

Name of Employer
Hazen Paper Company

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C166429

Amount of Each Receipt this Period
200.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 26
	<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)
Elizabeth Johnson

Mailing Address 1 Charles River Square

City State Zip Code
Boston MA 02114

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
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71113.C166507

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
C. Bruce Johnstone

Mailing Address 827 Charles River St.

City State Zip Code
Needham MA 02492

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

Name of Employer Fidelity Investments Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71113.C166475

Amount of Each Receipt this Period
600.00

Receipt

C. Full Name (Last, First, Middle Initial)
Drew Leff

Mailing Address 38 Heath St.

City State Zip Code
Brookline MA 02445

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

Name of Employer GLC Development Resources Occupation Real Estate Consult.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C166421

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 26
	<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)
Francis Lehar

Mailing Address 11 Norwood Avenue

City State Zip Code
Manchester MA 01944

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 ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71113.C166493

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Francis Madigan III

Mailing Address 125 Cranbrook Drive
DO NOT MAIL

City State Zip Code
Holden MA 01520

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

Name of Employer Occupation
F.W.Madigan Company, Inc. Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166447

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Francis Madigan III

Mailing Address 125 Cranbrook Drive
DO NOT MAIL

City State Zip Code
Holden MA 01520

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

Name of Employer Occupation
F.W.Madigan Company, Inc. Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166448

Amount of Each Receipt this Period
200.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 26
	<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)
Alexander Ogonowski

Mailing Address 713 Broadway Rd.

City State Zip Code
Dracut MA 01826

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

Name of Employer Occupation
Self Employed Farmer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 8125.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C166427

Amount of Each Receipt this Period
8000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Harold Pratt

Mailing Address 1010 Memorial Drive #9A

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Nichols & Pratt Private Trustee

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71113.C166491

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Horace Schermerhorn

Mailing Address 10 Village Drive

City State Zip Code
East Sandwich MA 02537

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C166403

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	8350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 26
	<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)
Steven Snider

Mailing Address 114 Shornecliffe Road

City State Zip Code
Newton MA 02458-2421

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

Name of Employer Occupation
Fidelity Investments Portfolio Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: 71015.C166470

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 83 E. Water Street- PO Box C

City State Zip Code
Rockland MA 02370

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

Name of Employer Occupation
Albert Culver Company Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71113.C166495

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Campbell Steward

Mailing Address 65 Asbury St.

City State Zip Code
Topsfield MA 01983

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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71113.C166488

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 26
	(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)
Peter Torkildsen

Mailing Address 1 Stony Brook Road

City State Zip Code
Chelmsford MA 01863

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

Name of Employer
Massachusetts Republican Party

Occupation
Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71113.C166510

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Clayton Trefry

Mailing Address 4712 Scotts Mill Ct.

City State Zip Code
Saugus MA 01906

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

Name of Employer
Retired

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: 71015.C166454

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	29200.00

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

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

Mailing Address 4250 Burton Drive

City State Zip Code
Santa Clara CA 95054-

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1311.00

Date of Receipt

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

Transaction ID: 71015.C166401

Amount of Each Receipt this Period
1311.00

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	1311.00
TOTAL This Period (last page this line number only)	▶	1311.00

**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 17 / 26

<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

Full Name (Last, First, Middle Initial) A. Csx Castle Self-Storage		Transaction ID: 71015.E9968
Mailing Address 39 Old Colony Ave.		Date of Disbursement 10 / 11 / 2007
City Boston	State MA	Zip Code 02127-
Purpose of Disbursement STORAGE		Amount of Each Disbursement this Period 319.00
Candidate Name	Category/ Type	
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) ▼	STORAGE
State: District:		

Full Name (Last, First, Middle Initial) B. Conference Call Conference Call.		Transaction ID: 71113.E9985
Mailing Address 1445 MacArthur Dr. Suite 214		Date of Disbursement 10 / 22 / 2007
City Carrollton	State TX	Zip Code 75007-
Purpose of Disbursement CONFERENCE CALL		Amount of Each Disbursement this Period 167.67
Candidate Name	Category/ Type	
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) ▼	CONFERENCE CALL
State: District:		

Full Name (Last, First, Middle Initial) C. Fls Connect		Transaction ID: 71113.E9974
Mailing Address 7300 Hudson Blvd. Ste		Date of Disbursement 10 / 15 / 2007
City Saint Paul	State MN	Zip Code 55128-
Purpose of Disbursement CANDIDATE ASSISTANCE ON TARGETING		Amount of Each Disbursement this Period 13250.46
Candidate Name	Category/ Type	
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) ▼	CANDIDATE ASSISTANCE ON TARGETING
State: District:		

SUBTOTAL of Disbursements This Page (optional)	13737.13
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 18 / 26

<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

Full Name (Last, First, Middle Initial) A. Hui Jojo Deng		Transaction ID: 71015.E9967 Date of Disbursement 10 / 11 / 2007	
Mailing Address 117 Beaconsfield Road		Amount of Each Disbursement this Period 429.00	
City Brookline State MA Zip Code 02445-	Purpose of Disbursement ACCOUNTING SERVICES Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Category/Type ACCOUNTING SERVICES	

Full Name (Last, First, Middle Initial) B. Guardian Guardian		Transaction ID: 71015.E9956 Date of Disbursement 10 / 01 / 2007	
Mailing Address Boston Group Office 1 Liberty Square		Amount of Each Disbursement this Period 817.99	
City Boston State MA Zip Code 02109-	Purpose of Disbursement INSURANCE Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Category/Type INSURANCE	

Full Name (Last, First, Middle Initial) C. Bruce Harrison		Transaction ID: 71113.E9973 Date of Disbursement 10 / 11 / 2007	
Mailing Address 101 Elm St		Amount of Each Disbursement this Period 22.00	
City Wakefield State MA Zip Code 01880-	Purpose of Disbursement REIMBURSEMENT FOR POSTAGE 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) ▼	
		Category/Type REIMBURSEMENT FOR POSTAGE	

SUBTOTAL of Disbursements This Page (optional) ▶	1268.99
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)

PAGE 19 / 26

<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

Full Name (Last, First, Middle Initial) A. HPH Inc. Harvard Pilgram Heal		Transaction ID: 71015.E9966 Date of Disbursement 10 / 11 / 2007
Mailing Address 1200 Crown Colony Dr.		Amount of Each Disbursement this Period 2391.58
City Quincy State MA Zip Code 02169-	Purpose of Disbursement HEALTH 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) ▼	HEALTH INSURANCE

Full Name (Last, First, Middle Initial) B. mindShift Technologies, Inc.		Transaction ID: 71113.E9981 Date of Disbursement 10 / 11 / 2007
Mailing Address PO Box 200105		Amount of Each Disbursement this Period 1000.00
City Pittsburgh State PA Zip Code 15251-	Purpose of Disbursement COMPUTER NETWORK	
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) ▼	COMPUTER NETWORK

Full Name (Last, First, Middle Initial) C. Konica Minolta Business Systems		Transaction ID: 71015.E9970 Date of Disbursement 10 / 11 / 2007
Mailing Address P.O. Box 7247-0322		Amount of Each Disbursement this Period 771.75
City Philadelphia State PA Zip Code 19170-0322	Purpose of Disbursement COPIER RENTAL	
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) ▼	COPIER RENTAL

SUBTOTAL of Disbursements This Page (optional) ▶	4163.33
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 20 / 26

<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

Full Name (Last, First, Middle Initial) A. Paychex/InterPay		Transaction ID: 71015.E9962 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address PO Box 8295		Amount of Each Disbursement this Period 1384.09
City Boston State MA Zip Code 02266-	PAYROLL TAXES	
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) ▼

Full Name (Last, First, Middle Initial) B. Paychex/InterPay		Transaction ID: 71015.E9957 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address PO Box 8295		Amount of Each Disbursement this Period 67.45
City Boston State MA Zip Code 02266-	PAYROLL SERVICES	
Purpose of Disbursement PAYROLL SERVICES		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) ▼

Full Name (Last, First, Middle Initial) C. Paychex/InterPay		Transaction ID: 71015.E9961 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address PO Box 8295		Amount of Each Disbursement this Period 155.00
City Boston State MA Zip Code 02266-	PAYROLL SERVICE CHARGE -4-01 K	
Purpose of Disbursement PAYROLL SERVICE CHARGE -401 K		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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1606.54
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<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

Full Name (Last, First, Middle Initial) A. Paychex/InterPay		Transaction ID: 71113.E9979 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address PO Box 8295		Amount of Each Disbursement this Period 961.54
City Boston State MA Zip Code 02266-	PAYROLL-401 K	
Purpose of Disbursement PAYROLL-401 K		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) ▼	

Full Name (Last, First, Middle Initial) B. Paychex/InterPay		Transaction ID: 71113.E9980 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address PO Box 8295		Amount of Each Disbursement this Period 1815.82
City Boston State MA Zip Code 02266-	PAYROLL-TAXES	
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) ▼	

Full Name (Last, First, Middle Initial) C. Poland Spring Poland Spring		Transaction ID: 71113.E9996 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7
Mailing Address Processing Center PO Box 52271		Amount of Each Disbursement this Period 77.07
City Phoenix State AZ Zip Code 85072-	BOTTLE WATER	
Purpose of Disbursement BOTTLE WATER		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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2854.43
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 22 / 26

<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

Full Name (Last, First, Middle Initial) A. Jody's Quik Print		Transaction ID: 71113.E9975 Date of Disbursement 10 / 15 / 2007
Mailing Address P.O. Box 1068		Amount of Each Disbursement this Period 1593.60
City Middleton State MA Zip Code 01949-	Category/ Type PRINTING	
Purpose of Disbursement PRINTING		
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) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: 71015.E9969 Date of Disbursement 10 / 11 / 2007
Mailing Address P.O. Box 1		Amount of Each Disbursement this Period 429.37
City Worcester State MA Zip Code 01654-	Category/ Type PHONE	
Purpose of Disbursement PHONE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Robert Willington		Transaction ID: 71113.E9992 Date of Disbursement 10 / 15 / 2007
Mailing Address 12 Arlington Street		Amount of Each Disbursement this Period 1338.86
City Reading State MA Zip Code 01867-	Category/ Type REIMBURSEMENT FOR TRAVEL: SEE BELOW	
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL: SEE BELOW		
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) ▶	3361.83
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)

PAGE 23 / 26

<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

Full Name (Last, First, Middle Initial) A. Mass. Bay Transport MBTA		Transaction ID: 71113.E9995 Date of Disbursement 10 / 15 / 2007
Mailing Address 10 Park Plaza, Room 8413		Amount of Each Disbursement this Period 285.00
City Boston State MA Zip Code 02116-	[MEMO ITEM] MEMO: REIMURSEMENT FOR R. WILLINGTON FOR TRAVEL	
Purpose of Disbursement REIMURSEMENT FOR R. WILLINGTON FOR TRAVE		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) ▼	

Full Name (Last, First, Middle Initial) B. Westborough Marriott		Transaction ID: 71113.E9994 Date of Disbursement 10 / 15 / 2007
Mailing Address 5400 Computer Drive		Amount of Each Disbursement this Period 449.12
City Westborough State MA Zip Code 01581-	[MEMO ITEM] MEMO: R. WILLINGTON REIMBURSEMENT FOR LODGING	
Purpose of Disbursement R. WILLINGTON REIMBURSEMENT FOR LODGING		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) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	26992.25

**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 24 / 26

<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

Full Name (Last, First, Middle Initial) A. Bruce Harrison		Transaction ID: 71113.E9972 Date of Disbursement 10 / 11 / 2007	
Mailing Address 101 Elm St		Amount of Each Disbursement this Period 1000.00	
City Wakefield State MA Zip Code 01880-	Purpose of Disbursement ADMINISTRATION SERVICE Candidate Name	Category/ Type ADMINISTRATION SERVICE	
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) ▼		

Full Name (Last, First, Middle Initial) B. Lyndsay Jones		Transaction ID: 71015.E9963 Date of Disbursement 10 / 04 / 2007	
Mailing Address 16 Oval Road		Amount of Each Disbursement this Period 1232.51	
City Quincy State MA Zip Code 02170-	Purpose of Disbursement PAYROLL Candidate Name	Category/ Type 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) ▼		

Full Name (Last, First, Middle Initial) C. Lyndsay Jones		Transaction ID: 71113.E9976 Date of Disbursement 10 / 18 / 2007	
Mailing Address 16 Oval Road		Amount of Each Disbursement this Period 1232.51	
City Quincy State MA Zip Code 02170-	Purpose of Disbursement PAYROLL Candidate Name	Category/ Type 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) ▶	3465.02
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 26

<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. Peter Torkildsen Full Name (Last, First, Middle Initial) Mailing Address 1 Stony Brook Road City Chelmsford State MA Zip Code 01863-		Transaction ID: 71113.E9977 Date of Disbursement 10 / 18 / 2007
Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 676.92 PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

B. Robert Willington Full Name (Last, First, Middle Initial) Mailing Address 12 Arlington Street City Reading State MA Zip Code 01867-		Transaction ID: 71015.E9964 Date of Disbursement 10 / 04 / 2007
Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 1399.58 PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

C. Robert Willington Full Name (Last, First, Middle Initial) Mailing Address 12 Arlington Street City Reading State MA Zip Code 01867-		Transaction ID: 71113.E9978 Date of Disbursement 10 / 18 / 2007
Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 1399.58 PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

SUBTOTAL of Disbursements This Page (optional)	3476.08
TOTAL This Period (last page this line number only)	6941.10

Image# 27931564241

Form/Schedule: **F3XN**

Transaction ID: **C00042622**

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