

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

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

ADDRESS (number and street)

1800 POST ROAD

SUITE 17-I

Check if different than previously reported. (ACC)

WARWICK

RI

02886

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C C00078196

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 M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day **POST-Election** Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period

M M / D D / Y Y Y Y Y Y 07 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2022

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 CHAPPELL, LANCE, , ,

Signature of Treasurer CHAPPELL, LANCE, , ,

Date 10 / 04 / 2023

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

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

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="2022"/>	<input type="text" value="123315.65"/>	<input type="text" value="123315.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="115765.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="141725.00"/>	<input type="text" value="197148.08"/>
(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="257490.75"/>	<input type="text" value="320463.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="93884.40"/>	<input type="text" value="156857.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="163606.35"/>	<input type="text" value="163606.35"/>
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

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).....	1805.00	3486.05
(ii) Unitemized	920.00	1602.03
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2725.00	5088.08
(b) Political Party Committees	128400.00	181400.00
(c) Other Political Committees (such as PACs).....	600.00	600.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	131725.00	187088.08
12. Transfers From Affiliated/Other Party Committees.....	10000.00	10000.00
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	60.00
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)).....▶	141725.00	197148.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	141725.00	197148.08

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	62972.98
(b) Other Federal Operating Expenditures	93771.41	93771.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	93771.41	156744.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	112.99	112.99
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)) ..	93884.40	156857.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	93884.40	93884.40

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)	131725.00	187088.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	131725.00	187088.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	93771.41	93771.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	93771.41	93771.41

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

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

FOR LINE NUMBER: PAGE 6 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Appt, Geoffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 Division Rd
 City East Greenwich State RI Zip Code 02818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GVorp Management Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 11 / 2022
Transaction ID : SA11AI.7179
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Mitchell, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 Olney Arnold Rd
 City Cranston State RI Zip Code 02921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Field Sales Engineering Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 11 / 2022
Transaction ID : SA11AI.7172
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Patrick, Donovan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 Harrison Ave
 City Newport State RI Zip Code 02840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Requested Occupation (for Individual) Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2022
Transaction ID : SA11AI.7170
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Pinsky, Tara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 Cole Ave
 City Providence State RI Zip Code 02906
 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 ▼ 305.00

Date of Receipt 07 / 06 / 2022
Transaction ID : SA11AI.7183
 Amount of Each Receipt this Period 305.00
 Memo Item

B. Sanborn, Mary Louise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 Bay View Drive
 City Jamestown State RI Zip Code 02835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2022
Transaction ID : SA11AI.7168
 Amount of Each Receipt this Period 500.00
 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)

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	805.00
TOTAL This Period (last page this line number only).....	1805.00

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

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

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. NRCC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 FIRST STREET SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00075820
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 15 / 2022
Transaction ID : SA11B.6834
 Amount of Each Receipt this Period 100000.00
 Memo Item

B. REPUBLICAN NATIONAL COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 First Street, SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00003418
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 54000.00

Date of Receipt 07 / 01 / 2022
Transaction ID : SA11B.6827
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. REPUBLICAN NATIONAL COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 First Street, SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00003418
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 68700.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11B.6828
 Amount of Each Receipt this Period 14700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 310 First Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
81400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2022

Transaction ID : SA11B.6829

Amount of Each Receipt this Period
12700.00

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
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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
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12700.00
TOTAL This Period (last page this line number only).....	128400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. East Greenwich Republican Town Committee

Mailing Address PO Box 1853

City East Greenwich State RI Zip Code 02818

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 ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2022
Transaction ID : SA11C.7177

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Lathrop for State Treasurer

Mailing Address PO Box 383

City North Kingstown State RI Zip Code 02852

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2022
Transaction ID : SA11C.7175

Amount of Each Receipt this Period
500.00

Memo Item

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

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

**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 11 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 310 First Street, SE

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2022

Transaction ID : SA12.7479

Amount of Each Receipt this Period
10000.00

Memo Item
In-kind - Advertising

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Airport Plaza Associates

Mailing Address 1800 Post ROad

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement

Rent

001

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	2	2

FEC Identification Number

C

Transaction ID : SB21B.6876

Amount of Each Disbursement this Period

6	2	5	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. Airport Plaza Associates

Mailing Address 1800 Post ROad

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement

Rent

001

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.6888

Amount of Each Disbursement this Period

6	2	5	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Airport Plaza Associates

Mailing Address 1800 Post ROad

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement

Rent

001

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.6909

Amount of Each Disbursement this Period

6	2	5	0	0
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Memo Item

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

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

1	8	7	5	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6873

Amount of Each Disbursement this Period

[REDACTED]	1000.00
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6874

Amount of Each Disbursement this Period

[REDACTED]	136.38
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6886

Amount of Each Disbursement this Period

[REDACTED]	1.00
------------	------

Memo Item

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

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

[REDACTED]	1137.38
------------	---------

[REDACTED]	
------------	--

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Category/
Type

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:

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.6887

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Category/
Type

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:

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.6889

Amount of Each Disbursement this Period

6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Sidekick

Mailing Address 1550 Old Annetta

City
Aledo

State
TX

Zip Code
76008

Purpose of Disbursement

001

Category/
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	2

FEC Identification Number

C
Transaction ID : SB21B.6908

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

2	0	6	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

2	0	6	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Cienki, Sue, , ,

Mailing Address 85 Walnut Drive

City
East Greenwich

State
RI

Zip Code
02818

Purpose of Disbursement

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6863

Amount of Each Disbursement this Period

[REDACTED] 1546.48

Memo Item

Full Name (Last, First, Middle Initial)

B. Cienki, Suzanne, , ,

Mailing Address 85 Walnut Street

City
East Greenwich

State
RI

Zip Code
02818

Purpose of Disbursement

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6851

Amount of Each Disbursement this Period

[REDACTED] 679.61

Memo Item

Full Name (Last, First, Middle Initial)

C. Conservative Caucus Committee

Mailing Address 3010 Old Ranch Parkwaqt
Suite 260

City
Seal Beach

State
CA

Zip Code
90740

Purpose of Disbursement

007

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6879

Amount of Each Disbursement this Period

[REDACTED] 215.91

Memo Item

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

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

[REDACTED] 2442.00

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Constant Contact

Mailing Address 1601 Trapelo Road

City Waltham

State MA

Zip Code 02451

Purpose of Disbursement

004

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6885

Amount of Each Disbursement this Period

[Redacted] 133.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Constant Contact

Mailing Address 1601 Trapelo Road

City Waltham

State MA

Zip Code 02451

Purpose of Disbursement

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6898

Amount of Each Disbursement this Period

[Redacted] 133.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Cotoia, Ron, , ,

Mailing Address 136 George Waterman Rd

City Johnston

State RI

Zip Code 02919

Purpose of Disbursement

Field Operations

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6855

Amount of Each Disbursement this Period

[Redacted] 456.00

Memo Item

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

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

[Redacted] 723.50

[Redacted]

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. D'Ellena, Anthony, , ,

Mailing Address 118 Bonnet Shores Rd

City
Naraganssett

State
RI

Zip Code
02882

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6849

Amount of Each Disbursement this Period

[REDACTED]	1450.00
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

B. D'Ellena, Anthony, , ,

Mailing Address 118 Bonnet Shores Rd

City
Naraganssett

State
RI

Zip Code
02882

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6860

Amount of Each Disbursement this Period

[REDACTED]	1450.00
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

C. DAVES MARKETPLACE

Mailing Address AIRPORT ROAD

City
WARWICK

State
RI

Zip Code
02886

Purpose of Disbursement

Candidate Name

001

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6923

Amount of Each Disbursement this Period

[REDACTED]	139.87
------------	--------

Memo Item

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

[REDACTED]	3039.87
------------	---------

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

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Dollar Tree

Mailing Address 1700 Post Road

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement

007

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6920

Amount of Each Disbursement this Period

[REDACTED] 133.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6841

Amount of Each Disbursement this Period

[REDACTED] 3846.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement

Travel Refund

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6845

Amount of Each Disbursement this Period

[REDACTED] 725.19

Memo Item

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

[REDACTED] 4705.09

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

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement

001

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		20		2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6842

Amount of Each Disbursement this Period

[REDACTED] 3846.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement

001

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6846

Amount of Each Disbursement this Period

[REDACTED] 3846.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement

002

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6848

Amount of Each Disbursement this Period

[REDACTED] 1122.36

Memo Item

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

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

[REDACTED] 8814.66

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City Providence

State RI

Zip Code 02903

Purpose of Disbursement

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6857

Amount of Each Disbursement this Period

[Redacted] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City Providence

State RI

Zip Code 02903

Purpose of Disbursement

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6858

Amount of Each Disbursement this Period

[Redacted] 1846.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City Providence

State RI

Zip Code 02903

Purpose of Disbursement

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6862

Amount of Each Disbursement this Period

[Redacted] 3846.15

Memo Item

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

[Redacted] 7692.30

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

[Redacted]

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)

Form for line numbers 21b through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City Providence State RI Zip Code 02903

Purpose of Disbursement

Category/Type 001

Candidate Name

Office Sought: House, Senate, President; Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement 09 / 14 / 2022

FEC Identification Number

FEC Identification Number C, Transaction ID: SB21B.6864, Amount of Each Disbursement this Period 3846.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Jesus Solorio

Mailing Address 10 Park Row West apt 625

City Providence State RI Zip Code 02903

Purpose of Disbursement

Category/Type 001

Candidate Name

Office Sought: House, Senate, President; Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement 09 / 28 / 2022

FEC Identification Number

FEC Identification Number C, Transaction ID: SB21B.6869, Amount of Each Disbursement this Period 3846.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Matthews, Cole, , ,

Mailing Address 55 Westonia Lane

City Warwick State RI Zip Code 02889

Purpose of Disbursement

Category/Type 001

Field Operations

Candidate Name

Office Sought: House, Senate, President; Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement 08 / 17 / 2022

FEC Identification Number

FEC Identification Number C, Transaction ID: SB21B.6853, Amount of Each Disbursement this Period 384.00

Memo Item

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

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

Summary boxes for SUBTOTAL (8076.30) and TOTAL

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Matthews, Cole, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 55 Westonia Lane

City Warwick State RI Zip Code 02889

Purpose of Disbursement
Field Operations

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 01 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.6861**

Amount of Each Disbursement this Period: 1450.00

Memo Item

B. Nationbuilder

Full Name (Last, First, Middle Initial)

Mailing Address 520 So Grand Ave

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 24 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.6891**

Amount of Each Disbursement this Period: 171.00

Memo Item

C. Nationbuilder

Full Name (Last, First, Middle Initial)

Mailing Address 520 So Grand Ave

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.6922**

Amount of Each Disbursement this Period: 171.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1792.00

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6838

Amount of Each Disbursement this Period

[Redacted] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6844

Amount of Each Disbursement this Period

[Redacted] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Candidate Name

001

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6847

Amount of Each Disbursement this Period

[Redacted] 1500.00

Memo Item

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

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

[Redacted] 4500.00

[Redacted]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2022

FEC Identification Number

C

Transaction ID : SB21B.6852

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2022

FEC Identification Number

C

Transaction ID : SB21B.6859

Amount of Each Disbursement this Period

1875.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2022

FEC Identification Number

C

Transaction ID : SB21B.6866

Amount of Each Disbursement this Period

1875.00

Memo Item

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

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

5250.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Naylor, Kenneth, , ,

Mailing Address 14 Shady Hill Dr

City
West Warwick

State
RI

Zip Code
02892

Purpose of Disbursement

Field Operations

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.6870

Amount of Each Disbursement this Period

[Redacted] 1800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Numinar

Mailing Address 1202 Wilson Blvd

City
Arlington

State
VA

Zip Code
22209

Purpose of Disbursement

Subscription

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.7163

Amount of Each Disbursement this Period

[Redacted] 1850.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Old Harbor Bike Shop

Mailing Address 432 Water St

City
New Shoreham

State
RI

Zip Code
02807

Purpose of Disbursement

Rental

007

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2022

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.7164

Amount of Each Disbursement this Period

[Redacted] 330.00

Memo Item

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

[Redacted] 3980.00

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

[Redacted]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Paiva, Steven, , ,

Mailing Address 1414 Park Ave
#1

City
Cranston

State
RI

Zip Code
02920

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6903

Amount of Each Disbursement this Period

1	4	5	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. Paiva, Steven, , ,

Mailing Address 1414 Park Ave
#1

City
Cranston

State
RI

Zip Code
02920

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6905

Amount of Each Disbursement this Period

1	4	5	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Paiva, Steven, , ,

Mailing Address 1414 Park Ave
#1

City
Cranston

State
RI

Zip Code
02920

Purpose of Disbursement

Field Operations

001

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6906

Amount of Each Disbursement this Period

1	4	5	0	0	0
---	---	---	---	---	---

Memo Item

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

4	3	5	0	0	0
---	---	---	---	---	---

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

4	3	5	0	0	0
---	---	---	---	---	---

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Panera Bread

Mailing Address 4000 Chapel View Blvd

City
Cranston

State
RI

Zip Code
02920

Purpose of Disbursement

007

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		27		2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6882

Amount of Each Disbursement this Period

409.96

Memo Item

Full Name (Last, First, Middle Initial)

B. Radisson Hotel

Mailing Address 2081 Post Road

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement

007

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6865

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 First Street, SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

In-kind - Advertising

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2022 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

FEC Identification Number

C C00003418

Transaction ID : SB21B.7480

Amount of Each Disbursement this Period

10000.00

Memo Item

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

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

11409.96

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Stephens, Kevin, , ,

Mailing Address 6 Raub Court

City
Stafford

State
VA

Zip Code
22405

Purpose of Disbursement

Field Operations

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2022

FEC Identification Number

C

Transaction ID : SB21B.6901

Amount of Each Disbursement this Period

1450.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stop andShop

Mailing Address 622 G. Washington Hwy

City
Lincoln

State
RI

Zip Code
02865

Purpose of Disbursement

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2022

FEC Identification Number

C

Transaction ID : SB21B.6913

Amount of Each Disbursement this Period

117.18

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 24 Corliss St

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2022

FEC Identification Number

C

Transaction ID : SB21B.6919

Amount of Each Disbursement this Period

275.00

Memo Item

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

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

1842.18

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 24 Corliss St

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	2	2

FEC Identification Number

C []

Transaction ID : SB21B.6899

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 24 Corliss St

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	2

FEC Identification Number

C []

Transaction ID : SB21B.6900

Amount of Each Disbursement this Period

3	5	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

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Memo Item

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

1	8	5	0	0	0
---	---	---	---	---	---

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

9	2	1	9	0	2	4
---	---	---	---	---	---	---