

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION COMMISSION
JUL 17 12 05 PM '98

USE FED MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) R.I. Republican State Central Committee	2. FEC IDENTIFICATION NUMBER C-00078196
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 551 South Main Street	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Providence, RI 02903	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4-1-98 through 6-30-98		
6. (a) Cash on Hand January 1, 19 98		\$ 601.65
(b) Cash on Hand at Beginning of Reporting Period	\$ 251.15	
(c) Total Receipts (from Line 19)	\$ 13,535.60	\$ 22,344.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 13,786.15	\$ 28,046.57
7. Total Disbursements (from Line 30)	\$ 11,698.30	\$ 25,958.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2087.85	\$ 2087.85
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9520 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 54,766.34	

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 Margaret C. Coughlin	Date 7/14/98
Signature of Treasurer <i>Margaret C. Coughlin</i>	

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE <i>RI Republican State Central Committee</i>		REPORT COVERING PERIOD FROM <i>7-1-98</i> TO: <i>6-30-98</i>		
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	1000. ⁰⁰	1000. ⁰⁰	11(a)(i)
ii.	Unitemized	2660. ⁰⁰	2660. ⁰⁰	11(a)(ii)
iii.	Total (add i and ii) >	3660. ⁰⁰	3660. ⁰⁰	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)	600. ⁰⁰	600. ⁰⁰	11(d)
d.	Total Contributions (add a ii, b and c) >	4260. ⁰⁰	4260. ⁰⁰	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	9295. ⁰⁰	83,184. ⁹²	18
18.	Transfers from Nonfederal Account for Joint Activity	13,535. ⁰⁰	27,444. ⁹²	19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4,260. ⁰⁰	4,260. ⁰⁰	20
20.	Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	1444. ³⁶	3199. ⁴¹	21(a)(i)
ii.	Non-Federal Share	10,174. ⁴⁴	22,628. ³¹	21(a)(ii)
b.	Other Federal Operating Expenditures	76. ⁰⁰	131. ⁰⁰	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	11,698. ³⁰	25,958. ⁷²	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees			23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >	- 0 -	- 0 -	28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,698. ³⁰	25,958. ⁷²	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	1521. ³⁶	3330. ⁴¹	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	4260. ⁰⁰	4260. ⁰⁰	32
33.	Total Contribution Refunds (from line 28d)	- 0 -	- 0 -	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	4260. ⁰⁰	4260. ⁰⁰	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	1521. ³⁶	3330. ⁴¹	35
36.	Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	1521. ³⁶	3330. ⁴¹	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 1196

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)

RI Republican State Central Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Reginald Costacchia 342 Old Plained Pike FOSTER, RI 02825	State of RI Occupation: ADJUTANT GENERAL Aggregate Year-to-Date > \$ 500	6/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Russell Jones 138 Louri Drive Charlestown, RI 02810	Retired Occupation: N/A Aggregate Year-to-Date > \$ 250	4/20/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marie Resz PO Box 1486 Newport, RI 02840	Retired Occupation: n/a Aggregate Year-to-Date > \$ 250	4/20/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1000

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

RZ Republican State Central Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>John MAISON FOR CONGRESS</u> <u>5 Mechanic Street</u> <u>Hopkinton, MA 02832</u>	<u>N/A</u>	<u>6/22/98</u>	<u>300.⁰⁰</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>N/A</u>	Aggregate Year-to-Date \gt \$ <u>300</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Ron SCARPA FOR CONGRESS</u> <u>277 Turner Road</u> <u>Middletown, RZ 02842</u>	<u>N/A</u>	<u>6/22/98</u>	<u>300.⁰⁰</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>N/A</u>	Aggregate Year-to-Date \gt \$ <u>300</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \gt \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \gt \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \gt \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \gt \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \gt \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

600

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21 b

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)

RC Republican State Central Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fleet Bank 100 Westminster Street Providence, RI 02903	Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/8/98 4/30/98	22.00 3.50
Same As "A" above	Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/98 5/12/98	22.00 22.00
Same As "A" above	Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/98 6/20/98	3.50 3.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

96.50

SCHEDULE D

(Revised 3/80)

DEBTS AND OBLIGATIONS

Excluding Loans

Page 1 of 5
 LINE NUMBER 10
 (Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican Party				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor RI Republican Party - STATE ACCOUNT - 551 S. Main Street Providence, RI 02903	8041.79	-0-	-0-	8041.79
Nature of Debt (Purpose): allocated expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Capital View Associates 400 Smith Street Providence, RI 02908	3500	-0-	-0-	3500.00
Nature of Debt (Purpose): Rent				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Halsey Properties 18 Burnside Street Bristol, RI 02809	1587.39	-0-	-0-	1587.39
Nature of Debt (Purpose): Rent + Utilities				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cellular One 1 Franklin Square Providence, RI 02903	3392.50	154.50	154.50	3392.50
Nature of Debt (Purpose): Telephone				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Norma Willis 1191 North Road JAMESTOWN, RI 02835	4000	-0-	-0-	4000.00
Nature of Debt (Purpose): back Pay				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor James E Murphy Jr 117 Upham Circle Gaithersburg, MD 20878	1778.86	-0-	-0-	1778.86
Nature of Debt (Purpose): Travel Expenses				
1) SUBTOTALS This Period This Page (optional)				28,300.04
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 5 total
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican Party				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Pitney Bowes PO Box 5151 Norwalk, CT 06856	1085. ⁹⁴	-0-	-0-	1085. ⁹⁴
Nature of Debt (Purpose): Equipment				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Print Source 114 Tanton Ave E. Providence, RI 02905	267. ⁶⁴	-0-	-0-	267. ⁶⁴
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AT+T PO Box 27866 Kansas City, MO 64184	180. ⁵⁵	-0-	-0-	180. ⁵⁵
Nature of Debt (Purpose): Exp Telephone				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Capriccio 2 Pine Street Providence, RI 02903	576. ¹⁵	-0-	-0-	576. ¹⁵
Nature of Debt (Purpose): meetings				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Richard Kizorian 377 Jastan Street Providence, RI 02908	1335. ⁰⁰	-0-	-0-	1335. ⁰⁰
Nature of Debt (Purpose): Photography				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor A-1 Answering Service PO Box 2149 Pawtucket, RI 02861	114. ²⁸	60. ⁴⁶	174. ⁷⁴	-0-
Nature of Debt (Purpose): Answering Service				
1) SUBTOTALS This Period This Page (optional)				3445. ²⁸
2) TOTALS This Period (last page in this line only)				-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 5
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Contributor (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican Party				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ralph Stuart Bond 3 Rosery Place Providence, RZ 02903	325. ⁰⁰	-0-	-0-	325. ⁰⁰
Nature of Debt (Purpose): BOND				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Adesso One Cushing Street Providence, RZ 02903	272. ⁹⁵	-0-	-0-	272. ⁹⁵
Nature of Debt (Purpose): Meeting				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Caffe Nuovo 1 Citizens Plaza Providence, RZ 02903	207. ⁴⁷	-0-	-0-	207. ⁴⁷
Nature of Debt (Purpose): Meeting				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Camille's 71 Broad Street Providence, RZ 02903	652. ⁶⁹	-0-	-0-	652. ⁶⁹
Nature of Debt (Purpose): Meeting				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Direct Mail Services 1450 Automobile Blvd St. Petersburg, FL	4007. ⁵²	-0-	-0-	4007. ⁵²
Nature of Debt (Purpose): Direct Mail				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor J-Text 29 Fountain Street Providence, RI 02903	41. ⁷⁴	-0-	-0-	41. ⁷⁴
Nature of Debt (Purpose): USEAGE fee				
1) SUBTOTALS This Period This Page (optional)				5507. ³⁷
2) TOTALS This Period (last page in this line only)				-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 4 of 3
LINE NUMBER 12
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican Party				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Old Canteen 126 Atwells Avenue Providence, RI 02903	447. ³⁵	-0-	-0-	447. ³⁵
Nature of Debt (Purpose): meetings				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Providence Marriott 10 Orms Street Providence, RI 02903	113. ⁷⁵	386. ²⁵	500. ⁰⁰	-0-
Nature of Debt (Purpose): Rentals				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Twin Oaks 100 Sabra Street Cranston, RI 02920	100. ⁹⁰	-0-	-0-	100. ⁹⁰
Nature of Debt (Purpose): meeting				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Blue Grotto 210 Atwells Avenue Providence, RI 02903	98. ⁰⁰	-0-	-0-	98. ⁰⁰
Nature of Debt (Purpose): meetings				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Calle Zai 1106 Cranston Street Cranston, RI 02920	100. ⁰⁰	-0-	-0-	100. ⁰⁰
Nature of Debt (Purpose): meeting				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cox Communication 111 Comstock Parkway Cranston, RI 02921	64. ⁶³	(64. ⁶³)	-0-	-0-
Nature of Debt (Purpose): cable				
1) SUBTOTALS This Period This Page (optional)				746. ²⁵
2) TOTALS This Period (last page in this line only)				-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D

(Revised 3/80)

DEBTS AND OBLIGATIONS

Excluding Loans

Page 5 of 5
 LINE NUMBER 16
 (Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican Party				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Tim Costa 64 Enfield Ave Providence, RI 02908	500. ⁰⁰	-0-	-0-	500. ⁰⁰
Nature of Debt (Purpose): Payroll				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Joan Guine 165 Mullen Hill Road Little Compton, RI 02835	13,525. ⁰⁰	8775. ⁰⁰	1550. ⁰⁰	20,750
Nature of Debt (Purpose): Gross Pay				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor TR Associates 95 Soccerasset Crossroads Cranston, RI 02910	498. ⁹⁰	-0-	-0-	498. ⁹⁰
Nature of Debt (Purpose): Signs				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Copyrite 1540 Pontiac Avenue Cranston, RI 02920	2354. ⁰⁰	-0-	2354. ⁰⁰	-0-
Nature of Debt (Purpose): Fax machine				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Best Buy Supply 81 Gilbane Ave Weymouth, RI 02886	707. ⁹⁷	-0-	707. ⁹⁷	-0-
Nature of Debt (Purpose): Supplies				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Bell Atlantic PO Box 968 Providence, RI 02901	-0-	1616. ¹⁰	597. ⁶⁰	1018. ⁵⁰
Nature of Debt (Purpose): Telephone				
1) SUBTOTALS This Period This Page (optional)				22,767. ⁴⁰
2) TOTALS This Period (last page in this line only)				54,766. ³⁴
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				54,766. ³⁴

ALLOCATION RATIOS

NAME OF COMMITTEE
R.I. Republican State Central Committee

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
<i>Golf '98</i>	<i>10</i>	<i>90</i>
ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE <i>RI Republican State Central Committee</i>	TOTAL AMOUNT TRANSFERRED
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NAME OF ACCOUNT <i>RI REP State Account</i>	DATE OF RECEIPT <i>4/1/98</i>	TOTAL AMOUNT TRANSFERRED <i>\$ 300</i>
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	<i>300</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT <i>RI REP State Account</i>	DATE OF RECEIPT <i>4/6/98</i>	TOTAL AMOUNT TRANSFERRED <i>\$ 300</i>
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	<i>300</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS
SUBTOTAL THIS PAGE	<i>600</i>		
TOTAL THIS PERIOD			<i>600</i>

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE <i>R.I. Republican State Central Committee</i>			TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT <i>RI GOP State Account</i>		DATE OF RECEIPT <i>4/22/98</i>	\$ <i>400</i>
BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	<i>400</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS
SUBTOTAL THIS PAGE	<i>400</i>		<i>400.00</i>
TOTAL THIS PERIOD			

NAME OF ACCOUNT <i>RI GOP State Account</i>			DATE OF RECEIPT <i>4/27/98</i>	\$ <i>4375</i>
BREAKDOWN OF TRANSFER RECEIVED				
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	<i>4375</i>			
ii) Direct Fundraising (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED				
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS	
SUBTOTAL THIS PAGE	<i>4375</i>		<i>4375.00</i>	
TOTAL THIS PERIOD				

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE <i>RI Republican Party</i>			TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT <i>RI GOP State Account</i>		DATE OF RECEIPT <i>5/14/98</i>	\$ <i>1200</i>
BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	<i>1200</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			
NAME OF ACCOUNT <i>RI GOP State Account</i>			DATE OF RECEIPT <i>5/20/98</i>
			\$ <i>1000</i>
BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	<i>1000</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
SUBTOTAL THIS PAGE	<i>2200</i>		
TOTAL THIS PERIOD			<i>2200</i>

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE <i>RI Republican State Central Committee</i>	TOTAL AMOUNT TRANSFERRED
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NAME OF ACCOUNT <i>RIGOP State Account</i>	DATE OF RECEIPT <i>6/27/98</i>	\$ <i>1700</i>
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	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	<i>1416.¹⁰</i>			
ii) Direct Fundraising (List Events-Amount for Each)				
a) <i>GOLF 98</i>		<i>283.⁹⁰</i>		
b)				
c)				
d)				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				

NAME OF ACCOUNT	DATE OF RECEIPT	\$
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	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive				
ii) Direct Fundraising (List Events-Amount for Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
SUBTOTAL THIS PAGE	<i>1416.¹⁰</i>	<i>283.⁹⁰</i>		<i>1700.⁰⁰</i>
TOTAL THIS PERIOD	<i>8991.¹⁰</i>	<i>283.⁹⁰</i>		<i>9275.⁰⁰</i>

NAME OF COMMITTEE

AZ Republican State Central Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>A-1 Answering Service PO Box 2149 Pawtucket, RI 02861</i>	<i>Answering Service</i>	<i>6/10/98</i>	<i>174.⁷⁴</i>	<i>21.⁷⁴</i>	<i>152.⁹⁰</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>13,533.¹⁰</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Bell Atlantic PO Box 908 Providence, RI 02901</i>	<i>Telephone</i>	<i>4/27/98</i>	<i>592.⁶⁰</i>	<i>74.⁹⁰</i>	<i>522.⁹⁰</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>1401</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Best Buy Supplies 59 Gilbane Street Wrentham, RI 02810</i>	<i>Supplies</i>	<i>5/20/98</i>	<i>707.⁹⁷</i>	<i>88.⁵⁰</i>	<i>619.⁴⁷</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>14835.⁹⁷</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Capitol One</i>	<i>Supplies</i>	<i>6/27/98</i>	<i>171.⁶⁸</i>	<i>21.⁴⁰</i>	<i>150.²²</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>15010.⁶⁸</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Cellular One 1 Franklin Square Providence, RI 02903</i>	<i>phone</i>	<i>5/28/98 6/12/98</i>	<i>51.⁵⁰ 103.⁰⁰</i>	<i>6.⁴⁴ 12.⁸⁹</i>	<i>45.⁰⁶ 90.¹²</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>15165.¹⁵</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Copyrite 1530 Pontiac Avenue Cranston, RI 02910</i>	<i>Fax machine</i>	<i>4/27/98</i>	<i>2354.⁰⁰</i>	<i>294.²⁵</i>	<i>2059.⁷⁵</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>17519.¹⁵</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			<i>4160.⁴⁹</i>	<i>520.⁰⁷</i>	<i>3640.⁴²</i>
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a 1 and non-Fed. share to 21 a 1)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

NAME OF COMMITTEE

RI Republican State Central Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
DAN'S Inn 220 Dowl Street Providence, RI 02903	rental - meeting	5/16/98	356. ⁵⁰	44. ⁵⁷	312. ⁰⁰
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 17875. ⁷² <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Hispanic Assembly of RI PO Box 73 Providence, RI 02903	Contribution	4/23/98	250. ⁰⁰	31. ²⁵	218. ⁷⁵
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1825. ⁷² <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Joan Quira 165 Mullen Hill Road Little Compton, RI 02837	Net Pay	4/23/98 4/25/98	592. ²⁵ 592. ²⁵	74. ⁰³ 74. ⁰³	518. ²² 518. ²²
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 19310. ²² <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SAME AS "C" above	Supplies - rein.	4/1/98 5/6/98 6/27/98	200. ⁰⁰ 142. ⁸⁷ 721. ⁸⁵	25. ⁰⁰ 17. ⁸⁶ 90. ²³	175. ⁰⁰ 125. ⁰¹ 631. ⁶²
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 20374. ⁸⁹ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Mancini Associates 551 S. Main Street Providence, RI 02903	Utilities	4/27/98 6/27/98	450. ⁹⁴ 83. ⁶⁰	56. ³⁷ 10. ⁴⁵	394. ⁵⁷ 73. ¹⁵
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 20909. ⁷⁹ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Providence Marriott 10 Gove Street Providence, RI 02904	meeting rental	6/24/98	500. ⁰⁰	62. ⁵⁰	437. ⁵⁰
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 21409. ⁰⁹ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			3890. ²³	486. ²⁷	3404. ⁰⁴
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

NAME OF COMMITTEE

RI Republican State Central Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Paychex, Inc. 504 Wampford, Trail E. Providence, RI 02914</i>	<i>payroll taxes</i>	<i>4/2/98 4/28/98</i>	<i>649.16 649.16</i>	<i>81.15 81.15</i>	<i>568.01 568.01</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 22707.50</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Same as "A" above</i>	<i>payroll preparation</i>	<i>4/30/98 5/1/98</i>	<i>54.24 51.30</i>	<i>6.78 6.41</i>	<i>47.46 44.89</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 22813.34</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Postmaster 29 Corliss Street Providence, RI 02901</i>	<i>postage</i>	<i>4/8/98 5/20/98 5/22/98</i>	<i>61.00 85.00 106.75</i>	<i>7.00 10.63 13.34</i>	<i>53.90 74.37 93.41</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 23006.69</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Same as "C" above</i>	<i>postage</i>	<i>6/4/98 6/19/98</i>	<i>128.00 209.00</i>	<i>16.00 25.50</i>	<i>112.00 178.50</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 23398.69</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Provident Financial</i>	<i>Supplies</i>	<i>5/27/98</i>	<i>359.94</i>	<i>44.99</i>	<i>314.95</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 23758.63</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Secretary of State 100 Smith Street Providence, RI 02908</i>	<i>Voter List</i>	<i>5/21/98</i>	<i>150.00</i>	<i>18.75</i>	<i>131.25</i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: <i>8 23908.63</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			<i>2499.15</i>	<i>312.40</i>	<i>2186.75</i>
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

RI Republican State Central Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Republican National Comm. 361 First Street, SE Washington, DC 20463	Reim- voter file	6/5/98	(150. ⁰⁰)	(18. ⁷⁵)	(131. ²⁵)
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 23758.63 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Staples 551 N. Main Street Providence, RI 02904	Supplies	5/14/98 5/28/98 6/12/98	63.83 108.55 86.51	7.98 13.57 10.81	55.85 94.98 75.70
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 24017.52 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Same As "B" above	Supplies	6/7/98 6/19/98	106.23 330.03	13.78 41.25	92.45 288.78
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 24453.78 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Stop + Shop 675 Bertram Hill Ave Providence, RI 02906	Supplies	4/8/98 4/27/98 6/22/98	123.88 45.13 42.22	15.49 5.64 5.28	108.39 39.49 36.94
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 24,605.91 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			756. ³⁸	94. ⁵⁵	661. ⁸³
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a 1 and non-Fed. share to 21 a 2) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

Re Republican State Central Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Cogens Printing</i>	<i>Golf '98 Printing</i>	<i>5/29/98</i>	<i>100.00</i>	<i>10.00</i>	<i>90.00</i>
		<i>6/17/98</i>	<i>151.45</i>	<i>15.15</i>	<i>136.30</i>
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>251.45</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Postmaster 29 Caliss Street Providence, RI 02901</i>	<i>Golf '98 POSTAGE</i>	<i>6/5/98</i>	<i>64.00</i>	<i>6.40</i>	<i>57.60</i>
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>64.00</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>0</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>0</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>0</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>0</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			<i>315.45</i>	<i>31.55</i>	<i>283.90</i>
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii) ...			<i>11,621.80</i>	<i>1444.80</i>	<i>10,176.94</i>
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/19/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	

S/P
PREPARER

7/12/98
DATE PREPARED