

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Massachusetts Republican State Congressional Committee

ADDRESS (number and street) 85 Merrimac Street, Suite 400
 Check if different than previously reported. (ACC)
Boston MA 02114

2. **FEC IDENTIFICATION NUMBER** C00042622
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 01 2007 through 11 30 2007

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 Brent Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 12 01 2008

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 7 | | 11950.90 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 2360.94 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 53193.00 | 541093.36 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 55553.94 | 553044.26 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 44131.83 | 541622.15 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 11422.11 | 11422.11 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 40150.00 | 386650.00 |
| (i) Itemized (use Schedule A) | 3043.00 | 108627.17 |
| (ii) Unitemized | 43193.00 | 495277.17 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 10000.00 | 39351.73 |
| (c) Other Political Committees (such as PACs) | 53193.00 | 534628.90 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 4214.24 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 2250.22 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 53193.00 | 541093.36 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 53193.00 | 541093.36 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 33881.72 | 348779.71 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 33881.72 | 348779.71 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 35746.73 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 13958.08 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 10250.11 | 143137.63 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 10250.11 | 143137.63 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 44131.83 | 541622.15 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 44131.83 | 541622.15 |

DETAILED SUMMARY PAGE
of Disbursements

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 53193.00 | 534628.90 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 53193.00 | 534628.90 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 33881.72 | 348779.71 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 4214.24 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 33881.72 | 344565.47 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32
(check only one)

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

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

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

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Abbott Laboratories PAC | | Date of Receipt MM / DD / YYYY 11 / 19 / 2007 |
| Mailing Address Maria Cahill 100 Abbott Park Road | | Transaction ID: 71210.C166556 |
| City North Chicago | State IL | Zip Code 60064 |
| FEC ID number of contributing federal political committee. C C00040279 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer PAC | Occupation FEC ID: C00040279 | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

B.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) General Electric PAC | | Date of Receipt MM / DD / YYYY 11 / 26 / 2007 |
| Mailing Address 1299 Pennsylvania Ave, NW Suite 900 | | Transaction ID: 71210.C166579 |
| City Washington | State DC | Zip Code 20004 |
| FEC ID number of contributing federal political committee. C C00024869 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer PAC | Occupation FEC ID: C00024869 | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

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

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

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

FOR LINE NUMBER: PAGE 7 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Otto Anderson

Mailing Address 43 Fernwood Avenue

City State Zip Code
Bradford MA 01835

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 15 / 2007
Transaction ID: 71115.C166533
Amount of Each Receipt this Period 100.00
Receipt

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

Mailing Address 10 Flanders Rd.

City State Zip Code
Westborough MA 01581

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

Name of Employer Plumb House Inc Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 29 / 2007
Transaction ID: 71210.C166605
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Martin Begien

Mailing Address 407 Warren Street

City State Zip Code
Brookline MA 02445

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 29 / 2007
Transaction ID: 71210.C166603
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Carol Breuer
Mailing Address 9 Plymouth Road
City Winchester State MA Zip Code 01890
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00
Date of Receipt 11 / 19 / 2007
Transaction ID: 71210.C166572
Amount of Each Receipt this Period 4000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Paul Buonopane
Mailing Address 262 Lincoln Rd
City Lincoln State MA Zip Code 01773
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 71115.C166532
Amount of Each Receipt this Period 200.00
Receipt

C. Full Name (Last, First, Middle Initial)
James Desmarais
Mailing Address 148 Lakeshore Dr.
City Dracut State MA Zip Code 01826
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 71115.C166527
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 4450.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 9 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Wolfgang Falcone
Mailing Address 80 Hancock Ave.
City State Zip Code
Brockton MA 02301
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 02 / 2007
Transaction ID: 71113.C166514
Amount of Each Receipt this Period 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Antonio Frias
Mailing Address 20 Cedar Street
City State Zip Code
Hudson MA 01749-1745
FEC ID number of contributing federal political committee. **C**
Name of Employer S & F Concrete Occupation Owner/CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 19 / 2007
Transaction ID: 71210.C166565
Amount of Each Receipt this Period 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Arnold Garrison
Mailing Address 181 Pine Ridge Rd.
City State Zip Code
Newton MA 02468
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 19 / 2007
Transaction ID: 71210.C166552
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1200.00
TOTAL This Period (last page this line number only) ►

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 32 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Jeffrey Horvitz | Date of Receipt MM / DD / YYYY 11 / 16 / 2007 |
| | Mailing Address 65 West Street P.O. Box 5630-0512 | Transaction ID: 71210.C166545 |
| | City State Zip Code Beverly MA 01915-0512 | Amount of Each Receipt this Period 5000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Self Employed Occupation investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) James Knott | Date of Receipt MM / DD / YYYY 11 / 13 / 2007 |
| | Mailing Address 456 Hill Street | Transaction ID: 71113.C166524 |
| | City State Zip Code Whitinsville MA 01588 | Amount of Each Receipt this Period 10000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Riverdale Mills Corporation Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Francis Lehar | Date of Receipt MM / DD / YYYY 11 / 15 / 2007 |
| | Mailing Address 11 Norwood Avenue | Transaction ID: 71115.C166538 |
| | City State Zip Code Manchester MA 01944 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00 | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 15100.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Donald Lukens

Mailing Address 84 Eldredge St.
Apt. 1

City State Zip Code
Newton MA 02458

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2007

Transaction ID: 71113.C166521

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Paul Noble

Mailing Address 110 Black Rock Drive

City State Zip Code
Hingham MA 02043

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2007

Transaction ID: 71210.C166553

Amount of Each Receipt this Period
2500.00

Receipt

C.

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

Mailing Address 72 Old Pasture Road

City State Zip Code
Cohasset MA 02025

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

Name of Employer State Street Development Manag Occupation Real Estate Development Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2007

Transaction ID: 71210.C166547

Amount of Each Receipt this Period
1000.00

Receipt

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3700.00 |
| TOTAL This Period (last page this line number only) | |

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Paul Owens

Mailing Address PO Box 920390

City State Zip Code
Needham MA 02492-0005

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

Name of Employer Occupation
IntrinsiQ, Inc Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 71115.C166536

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 99 Belmont Ave

City State Zip Code
Lowell MA 01852

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

Name of Employer Occupation
Pearson & Pearson/ Butler Bank Attorney/ Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2007

Transaction ID: 71210.C166546

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Frank Pedlow

Mailing Address 23 Ridgeway Lane

City State Zip Code
Boston MA 02114

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 26 / 2007

Transaction ID: 71210.C166573

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 32
(check only one)

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

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

| | | | | | |
|---|---|-----------------------|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Michael Potaski | | Date of Receipt MM / DD / YYYY 11 / 26 / 2007 | | |
| | Mailing Address 24B Church Street | | Transaction ID: 71210.C166584 | | |
| | City Linwood | State MA | Zip Code 01525 | Amount of Each Receipt this Period 50.00 | |
| | FEC ID number of contributing federal political committee. C | | Receipt | | |
| | Name of Employer Retired | Occupation Retired | Aggregate Year-to-Date 2550.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|-----------------------|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Jacques Prindiville | | Date of Receipt MM / DD / YYYY 11 / 28 / 2007 | | |
| | Mailing Address 1550 Worcester Rd, Rt. 9 Chapel Hill West Unit 508 | | Transaction ID: 71210.C166594 | | |
| | City Framingham | State MA | Zip Code 01702-8931 | Amount of Each Receipt this Period 50.00 | |
| | FEC ID number of contributing federal political committee. C | | Receipt | | |
| | Name of Employer Retired | Occupation Retired | Aggregate Year-to-Date 1050.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|---------------------------|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Michael Robbins | | Date of Receipt MM / DD / YYYY 11 / 13 / 2007 | | |
| | Mailing Address 105 Colchester St. 2008 KC MEMBER!!! | | Transaction ID: 71113.C166523 | | |
| | City Brookline | State MA | Zip Code 02446 | Amount of Each Receipt this Period 1000.00 | |
| | FEC ID number of contributing federal political committee. C | | Receipt | | |
| | Name of Employer Advest Company | Occupation Investments | Aggregate Year-to-Date 1000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

| | | | |
|---|---|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Michael Schaefer | | Date of Receipt |
| | Mailing Address PO Box 71 | | <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | Easthampton | MA | 01027 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer The October Company | | Occupation Executive | Transaction ID: 71210.C166606 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="200.00"/> |
| | | <input type="text" value="200.00"/> | Receipt |

| | | | |
|---|--|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) John Sears | | Date of Receipt |
| | Mailing Address 7 Acorn St. | | <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | Boston | MA | 02108 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer Retired | | Occupation Retired | Transaction ID: 71210.C166591 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| | | <input type="text" value="555.00"/> | Receipt |

| | | | |
|---|--|--------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Thomas Shields | | Date of Receipt |
| | Mailing Address 122 Hart Street | | <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | Beverly | MA | 01915 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer Self Employed | | Occupation Executive | Transaction ID: 71210.C166571 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="3500.00"/> |
| | | <input type="text" value="3500.00"/> | Receipt |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="4200.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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 15 / 32 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Derek Smith | Date of Receipt MM / DD / YYYY 11 / 08 / 2007 |
| | Mailing Address 2 Bridal Path Lane | Transaction ID: 71113.C166516 |
| | City State Zip Code Beverly MA 01915 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation Castel, Inc CFO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Arthur Turner | Date of Receipt MM / DD / YYYY 11 / 15 / 2007 |
| | Mailing Address PO Box 543 | Transaction ID: 71115.C166534 |
| | City State Zip Code Carlisle MA 01741 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation Retired Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Raymond Tye | Date of Receipt MM / DD / YYYY 11 / 26 / 2007 |
| | Mailing Address 175 Campanelli Drive | Transaction ID: 71210.C166580 |
| | City State Zip Code Braintree MA 02184 | Amount of Each Receipt this Period 5000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation United Liquors, Ltd. Chairman of the Board of Direc | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 9500.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6100.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 16 / 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Christopher Vincze | | Date of Receipt MM / DD / YYYY 11 / 19 / 2007 |
| Mailing Address 1 Eisenhaure Lane | | Transaction ID: 71210.C166554 |
| City North Reading | State MA | Zip Code 01864 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer TRC Companies | Occupation Executive | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Katherine Winter | | Date of Receipt MM / DD / YYYY 11 / 15 / 2007 |
| Mailing Address 10 Marlborough St. | | Transaction ID: 71115.C166529 |
| City Boston | State MA | Zip Code 02116 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Self Employed | Occupation Homemaker | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1100.00 |
| TOTAL This Period (last page this line number only) | ▶ | 40150.00 |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 32

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

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

| | | |
|-----------|--|--|
| A. | Full Name (Last, First, Middle Initial) Boy Genius- Boy Genius Inc. <hr/> Mailing Address PO Box 61 <hr/> City Pascoag State RI Zip Code 02859- <hr/> Purpose of Disbursement Web Hosting Candidate Name Category/ Type <hr/> 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: | Transaction ID: 71210.E10023 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 400.00 <hr/> WEB HOSTING |
| B. | Full Name (Last, First, Middle Initial) Css Castle Self-Storage <hr/> Mailing Address 39 Old Colony Ave. <hr/> City Boston State MA Zip Code 02127- <hr/> Purpose of Disbursement Storage Candidate Name Category/ Type <hr/> 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: | Transaction ID: 71210.E10034 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 678.00 <hr/> STORAGE |
| C. | Full Name (Last, First, Middle Initial) Hui Jojo Deng <hr/> Mailing Address 117 Beaconsfield Road <hr/> City Brookline State MA Zip Code 02445- <hr/> Purpose of Disbursement Accounting Services Candidate Name Category/ Type <hr/> 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: | Transaction ID: 71210.E10015 Date of Disbursement 11 / 13 / 2007 <hr/> Amount of Each Disbursement this Period 693.00 <hr/> ACCOUNTING SERVICES |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1771.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 32

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

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

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Datamarks Direct Marketing | Transaction ID: 71210.E10021 Date of Disbursement 11 / 14 / 2007 |
| | Mailing Address 37B Averill Street PO Box 68 | Amount of Each Disbursement this Period 2000.00 |
| | City Topsfield State MA Zip Code 01983- | |
| | Purpose of Disbursement Postage for invitations for general Party fundraising event non FEA | POSTAGE FOR INVITATIONS FOR GENERAL PARTY FUNDRAI- SING EVENT NON FEA |
| | Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) DirecTV DirecTV | Transaction ID: 71210.E10024 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address PO Box 60036 | Amount of Each Disbursement this Period 129.25 |
| | City Los Angeles State CA Zip Code 90060-0036 | |
| | Purpose of Disbursement Cable | CABLE |
| | Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) Federal Express (Fed Ex) | Transaction ID: 71210.E10025 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address PO Box 371461 | Amount of Each Disbursement this Period 141.72 |
| | City Pittsburgh State PA Zip Code 15250- | |
| | Purpose of Disbursement Express Mail | EXPRESS MAIL |
| | Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ▶

2270.97

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 32

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

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

| | |
|---|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Fleet Bank</p> <p>Mailing Address 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10006 Date of Disbursement: 11 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>BANK SERVICE CHARGE</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Guardian Guardian</p> <p>Mailing Address Boston Group Office 1 Liberty Square</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71113.E9983 Date of Disbursement: 11 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 408.56</p> <p>INSURANCE</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Bruce Harrison</p> <p>Mailing Address 101 Elm St</p> <p>City Wakefield State MA Zip Code 01880-</p> <p>Purpose of Disbursement Reimbursement for Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10018 Date of Disbursement: 11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 36.18</p> <p>REIMBURSEMENT FOR PARKING</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

469.74

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) HPH Inc. Harvard Pilgram Heal Mailing Address 1200 Crown Colony Dr. City Quincy State MA Zip Code 02169- Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10017 Date of Disbursement 11 / 13 / 2007 Amount of Each Disbursement this Period 1411.42 HEALTH INSURANCE |
| B. | Full Name (Last, First, Middle Initial) Lyndsay Jones Mailing Address 16 Oval Road City Quincy State MA Zip Code 02170- Purpose of Disbursement Reimbursement for Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10022 Date of Disbursement 11 / 19 / 2007 Amount of Each Disbursement this Period 331.40 REIMBURSEMENT FOR TRAVEL |
| C. | Full Name (Last, First, Middle Initial) Lexis-Nexis Mailing Address PO Box 7247-7090 City Philadelphia State PA Zip Code 19170- Purpose of Disbursement Research Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10000 Date of Disbursement 11 / 01 / 2007 Amount of Each Disbursement this Period 1000.00 RESEARCH |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2742.82 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Merchants Bankcard | Transaction ID: 71210.E10004 Date of Disbursement 11 / 01 / 2007 |
| | Mailing Address Fleet Bank 100 Federal Street | Amount of Each Disbursement this Period 75.04 |
| | City Boston State MA Zip Code 02110- | |
| | Purpose of Disbursement Credit Card Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CREDITR CARD FEE |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Merchants Bankcard | Transaction ID: 71210.E10005 Date of Disbursement 11 / 01 / 2007 |
| | Mailing Address Fleet Bank 100 Federal Street | Amount of Each Disbursement this Period 25.00 |
| | City Boston State MA Zip Code 02110- | |
| | Purpose of Disbursement Credit Card Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CREDIT CARD FEE |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Konica Minolta Business Systems | Transaction ID: 71210.E10016 Date of Disbursement 11 / 13 / 2007 |
| | Mailing Address P.O. Box 7247-0322 | Amount of Each Disbursement this Period 778.25 |
| | City Philadelphia State PA Zip Code 19170-0322 | |
| | Purpose of Disbursement Copier Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | COPIER RENTAL |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 878.29 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Communication Inc OBrien | Transaction ID: 71210.E10027 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address PO Box 659 | Amount of Each Disbursement this Period 335.00 |
| | City Wrentham State MA Zip Code 02093- | |
| | Purpose of Disbursement Phone System | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PHONE SYSTEM |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Omni Parker House | Transaction ID: 71210.E10031 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address 60 School Street | Amount of Each Disbursement this Period 1922.76 |
| | City Boston State MA Zip Code 02108- | |
| | Purpose of Disbursement Event-Room Rental for general Party fundraising event - non FEA | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | EVENT-ROOM RENTAL FOR GENERAL PARTY FUNDRAISING EVENT - NON FEA |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Ox-Eye Properties | Transaction ID: 71210.E10013 Date of Disbursement 11 / 13 / 2007 |
| | Mailing Address c/o Massey & Co. 85 Merrimac Street | Amount of Each Disbursement this Period 3695.00 |
| | City Boston State MA Zip Code 02114- | |
| | Purpose of Disbursement Rent | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | RENT |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 5952.76 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 32

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Ox-Eye Properties | Transaction ID: 71210.E10014 Date of Disbursement 11 / 13 / 2007 |
| | Mailing Address c/o Massey & Co. 85 Merrimac Street | Amount of Each Disbursement this Period 879.23 |
| | City Boston State MA Zip Code 02114- | |
| | Purpose of Disbursement Utility | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | UTILITY |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Ox-Eye Properties | Transaction ID: 71210.E10043 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address c/o Massey & Co. 85 Merrimac Street | Amount of Each Disbursement this Period 4351.51 |
| | City Boston State MA Zip Code 02114- | |
| | Purpose of Disbursement Rent and Utility | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | RENT AND UTILITY |
| | State: District: | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71113.E9989 Date of Disbursement 11 / 01 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 1384.09 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll-Taxes | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | PAYROLL-TAXES |
| | State: District: | |

SUBTOTAL of Disbursements This Page (optional) ▶

6614.83

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 32

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71113.E9990 Date of Disbursement 11 / 12 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 194.39 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll Service Charge | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL SERVICE CHARGE |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71210.E9999 Date of Disbursement 11 / 16 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 961.54 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll- 401 K | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL- 401 K |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71210.E9998 Date of Disbursement 11 / 16 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 1815.82 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll -Taxes | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL -TAXES |

SUBTOTAL of Disbursements This Page (optional) ▶

2971.75

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71210.E9997 Date of Disbursement 11 / 16 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 269.00 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll Servic-401 K Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL SERVIC-401 K |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71210.E10040 Date of Disbursement 11 / 29 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 961.54 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll-401 K Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL-401 K |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Paychex/InterPay | Transaction ID: 71210.E10039 Date of Disbursement 11 / 29 / 2007 |
| | Mailing Address PO Box 8295 | Amount of Each Disbursement this Period 1815.82 |
| | City Boston State MA Zip Code 02266- | |
| | Purpose of Disbursement Payroll -Taxes Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL -TAXES |

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| SUBTOTAL of Disbursements This Page (optional) | 3046.36 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Poland Spring Poland Spring <hr/> Mailing Address Processing Center PO Box 52271 <hr/> City Phoenix State AZ Zip Code 85072- <hr/> Purpose of Disbursement Bottle Water Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10020 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 38.63 <hr/> BOTTLE WATER |
| B. | Full Name (Last, First, Middle Initial) Jodys Quik Print <hr/> Mailing Address P.O. Box 1068 <hr/> City Middleton State MA Zip Code 01949- <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10026 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 690.60 <hr/> PRINTING |
| C. | Full Name (Last, First, Middle Initial) Hudson Portuguese Cl Riverview <hr/> Mailing Address 13 Port St. <hr/> City Hudson State MA Zip Code 01749- <hr/> Purpose of Disbursement Event - Deposit - general party fundraising event - non-FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10032 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> EVENT - DEPOSIT - GENERAL PARTY FUNDRAISING EVENT - NON-FEA |

SUBTOTAL of Disbursements This Page (optional) ▶

1229.23

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address Steve Meyers 1283 Main Street</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement Direct Mail and Telemarketing - general Party related fundraising - non-FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10033</p> <p>Date of Disbursement MM / DD / YYYY 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 1940.22</p> <p>DIRECT MAIL AND TELEMARKETING - GENERAL PARTY RELATED FUNDRAISING - NON-FEA</p> |
| <p>B. Full Name (Last, First, Middle Initial) Staples, Inc.</p> <p>Mailing Address Staples Credit Plan Dept. 80 - 0088936796</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10029</p> <p>Date of Disbursement MM / DD / YYYY 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 735.02</p> <p>OFFICE SUPPLIES</p> |
| <p>C. Full Name (Last, First, Middle Initial) T-Mobile T-Mobile</p> <p>Mailing Address PO Box 790047</p> <p>City Saint Louis State MO Zip Code 63179-</p> <p>Purpose of Disbursement Phone Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10012</p> <p>Date of Disbursement MM / DD / YYYY 11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1607.79</p> <p>PHONE SERVICES</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

4283.03

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 32

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Verizon | Transaction ID: 71210.E10010 Date of Disbursement 11 / 13 / 2007 |
| | Mailing Address P.O. Box 1 | Amount of Each Disbursement this Period 413.54 |
| | City Worcester State MA Zip Code 01654- Purpose of Disbursement Phone Candidate Name | PHONE |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Verizon | Transaction ID: 71210.E10011 Date of Disbursement 11 / 19 / 2007 |
| | Mailing Address P.O. Box 1 | Amount of Each Disbursement this Period 408.07 |
| | City Worcester State MA Zip Code 01654- Purpose of Disbursement Phone Candidate Name | PHONE |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Verizon Internet Services | Transaction ID: 71210.E10009 Date of Disbursement 11 / 13 / 2007 |
| | Mailing Address PO Box 101096 | Amount of Each Disbursement this Period 767.62 |
| | City Atlanta State GA Zip Code 30392- Purpose of Disbursement Internet Service Candidate Name | INTERNET SERVICE |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

SUBTOTAL of Disbursements This Page (optional) ▶

1589.23

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

33820.01

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

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

FOR LINE NUMBER:
(check only one)

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

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

| | | | |
|-----------|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Bruce Harrison Mailing Address 101 Elm St City Wakefield State MA Zip Code 01880- Purpose of Disbursement Payroll-Administration Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10019 Date of Disbursement 11 / 13 / 2007 Amount of Each Disbursement this Period 1000.00 PAYROLL-ADMINISTRATION SE-RVICE | |
| B. | Full Name (Last, First, Middle Initial) Lyndsay Jones Mailing Address 16 Oval Road City Quincy State MA Zip Code 02170- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71113.E9987 Date of Disbursement 11 / 01 / 2007 Amount of Each Disbursement this Period 1232.51 PAYROLL | |
| C. | Full Name (Last, First, Middle Initial) Lyndsay Jones Mailing Address 16 Oval Road City Quincy State MA Zip Code 02170- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 71210.E10001 Date of Disbursement 11 / 16 / 2007 Amount of Each Disbursement this Period 1232.51 PAYROLL | |

SUBTOTAL of Disbursements This Page (optional) ▶

3465.02

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10035</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1232.51"/></p> <p>PAYROLL</p> |
| <p>B. Full Name (Last, First, Middle Initial) Peter Torkildsen</p> <p>Mailing Address 1 Stony Brook Road</p> <p>City Chelmsford State MA Zip Code 01863-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10002</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="676.92"/></p> <p>PAYROLL</p> |
| <p>C. Full Name (Last, First, Middle Initial) Peter Torkildsen</p> <p>Mailing Address 1 Stony Brook Road</p> <p>City Chelmsford State MA Zip Code 01863-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 71210.E10036</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="676.92"/></p> <p>PAYROLL</p> |

| | |
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| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="2586.35"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Robert Willington | Transaction ID: 71113.E9988 Date of Disbursement 11 / 01 / 2007 |
| | Mailing Address 12 Arlington Street | Amount of Each Disbursement this Period 1399.58 |
| | City Reading State MA Zip Code 01867- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial) Robert Willington | Transaction ID: 71210.E10003 Date of Disbursement 11 / 16 / 2007 |
| | Mailing Address 12 Arlington Street | Amount of Each Disbursement this Period 1399.58 |
| | City Reading State MA Zip Code 01867- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. | Full Name (Last, First, Middle Initial) Robert Willington | Transaction ID: 71210.E10038 Date of Disbursement 11 / 29 / 2007 |
| | Mailing Address 12 Arlington Street | Amount of Each Disbursement this Period 1399.58 |
| | City Reading State MA Zip Code 01867- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

4198.74

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

10250.11

Image# 28934443319

Form/Schedule: **F3XA**

Transaction ID:

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for employer-occupation if one was not provided in order to meet best efforts policy.
