

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day **POST-Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

04 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hogan, Michael, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Hogan, Michael, , ,* [Electronically Filed] Date / /

01 / 23 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="57058.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="52729.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="17560.80"/>	<input type="text" value="25906.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="70290.67"/>	<input type="text" value="82965.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17800.00"/>	<input type="text" value="30475.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="52490.67"/>	<input type="text" value="52490.67"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	7110.80	15456.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7110.80	15456.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7110.80	15456.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	10450.00	10450.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17560.80	25906.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17560.80	25906.90

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	17800.00	30475.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17800.00	30475.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17800.00	30475.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7110.80	15456.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7110.80	15456.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial) A. Amore, Greg, , ,		Date of Disbursement MM / DD / YYYY 04 / 13 / 2017	
Mailing Address 73 Plymouth Road		FEC Identification Number C [REDACTED] Transaction ID : SB29.5501 Amount of Each Disbursement this Period [REDACTED] 300.00	
City East Providence	State RI	Zip Code 02914	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B. Archambault, Stephen, , ,		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017	
Mailing Address PO Box 8864		FEC Identification Number C [REDACTED] Transaction ID : SB29.5525 Amount of Each Disbursement this Period [REDACTED] 250.00	
City Cranston	State RI	Zip Code 02920	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) C. Bennett, David, , ,		Date of Disbursement MM / DD / YYYY 05 / 02 / 2017	
Mailing Address 27 Shippee AVenue		FEC Identification Number C [REDACTED] Transaction ID : SB29.5513 Amount of Each Disbursement this Period [REDACTED] 300.00	
City Warwick	State RI	Zip Code 02886	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	[REDACTED] 850.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial) A. Canacro, Dennis, , ,		Date of Disbursement MM / DD / YYYY 04 / 11 / 2017	
Mailing Address 64 Birchwood Drive		FEC Identification Number C [REDACTED] Transaction ID : SB29.5497 Amount of Each Disbursement this Period [REDACTED] 250.00	
City Portsmouth	State RI	Zip Code 02871	Category/ Type 011
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
Full Name (Last, First, Middle Initial) B. Ciccone, Frank A., , , III		Date of Disbursement MM / DD / YYYY 04 / 11 / 2017	
Mailing Address 15 Mercy Street		FEC Identification Number C [REDACTED] Transaction ID : SB29.5498 Amount of Each Disbursement this Period [REDACTED] 600.00	
City Providence	State RI	Zip Code 02909	Category/ Type 011
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
Full Name (Last, First, Middle Initial) C. Conley, William, , ,		Date of Disbursement MM / DD / YYYY 05 / 24 / 2017	
Mailing Address 690 Warren Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB29.5535 Amount of Each Disbursement this Period [REDACTED] 400.00	
City East Providence	State RI	Zip Code 02914	Category/ Type 011
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 1250.00	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full) RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Form A: Corvese, Arthur, , , including fields for Name, Address, Date of Disbursement (04/26/2017), FEC ID, Transaction ID (SB29.5509), and Amount (500.00).

Form B: Cote, Marc, , , including fields for Name, Address, Date of Disbursement (04/27/2017), FEC ID, Transaction ID (SB29.5511), and Amount (250.00).

Form C: Fogarty, Paul, , , including fields for Name, Address, Date of Disbursement (05/04/2017), FEC ID, Transaction ID (SB29.5517), and Amount (300.00).

SUBTOTAL of Disbursements This Page (optional) 1050.00 and TOTAL This Period (last page this line number only) fields.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial) A. Goodwin, Maryellen, , ,			Date of Disbursement MM / DD / YYYY 05 / 10 / 2017	
Mailing Address 325 Smith Street				
City Providence	State RI	Zip Code 02908	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB29.5522 Amount of Each Disbursement this Period [REDACTED] 500.00	
Candidate Name		Memo Item <input type="checkbox"/>		
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: _____				
Full Name (Last, First, Middle Initial) B. Hull, Raymond, , ,			Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 616 Mt. Pleasant Avenue				
City Providence	State RI	Zip Code 02908	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB29.5531 Amount of Each Disbursement this Period [REDACTED] 250.00	
Candidate Name		Memo Item <input type="checkbox"/>		
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: _____				
Full Name (Last, First, Middle Initial) C. Jacquard, Robert, , ,			Date of Disbursement MM / DD / YYYY 04 / 06 / 2017	
Mailing Address 117 Keith Ave.				
City Cranston	State RI	Zip Code 02910	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB29.5494 Amount of Each Disbursement this Period [REDACTED] 300.00	
Candidate Name		Memo Item <input type="checkbox"/>		
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)..... ▶			[REDACTED] 1050.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial) A. Keable, Cale, , ,		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017	
Mailing Address 650 Camp Dixie Road		FEC Identification Number C [REDACTED] Transaction ID : SB29.5510 Amount of Each Disbursement this Period [REDACTED] 400.00	
City Pascoag	State RI	Zip Code 02859	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B. Kennedy, Brian, , ,		Date of Disbursement MM / DD / YYYY 06 / 05 / 2017	
Mailing Address P.O. Box 1001		FEC Identification Number C [REDACTED] Transaction ID : SB29.5542 Amount of Each Disbursement this Period [REDACTED] 250.00	
City Ashway	State RI	Zip Code 02804	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) C. Lombard, John, , ,		Date of Disbursement MM / DD / YYYY 05 / 04 / 2017	
Mailing Address 48 Grove Street		FEC Identification Number C [REDACTED] Transaction ID : SB29.5519 Amount of Each Disbursement this Period [REDACTED] 400.00	
City Providence	State RI	Zip Code 02909	Category/ Type 011
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	[REDACTED] 1050.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

A. Lombardi, Frank, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 225 Broadway

City Providence State RI Zip Code 02903

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB29.5536

Amount of Each Disbursement this Period: 400.00

Memo Item

B. Lynch, Erin, P., ,

Full Name (Last, First, Middle Initial)

Mailing Address 600 Tollgate Road

City Warwick State RI Zip Code 02886

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.5514

Amount of Each Disbursement this Period: 400.00

Memo Item

C. Maldonado, Shelby, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 Washington Street

City Central Falls State RI Zip Code 02860

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB29.5490

Amount of Each Disbursement this Period: 300.00

Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial) A. McCaffrey, Michael, J, ,		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 115 Twin Oak Drive			
City Warwick	State RI	Zip Code 02889	
Purpose of Disbursement Contribution		011 Category/ Type	FEC Identification Number C Transaction ID : SB29.5530 Amount of Each Disbursement this Period 1000.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) B. McEntee, Hagan, , ,		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017	
Mailing Address 70 B Broad Rack Road			
City South Kingstown	State RI	Zip Code 02879	
Purpose of Disbursement Contribution		011 Category/ Type	FEC Identification Number C Transaction ID : SB29.5499 Amount of Each Disbursement this Period 300.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) C. McLaughlin, James, , ,		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017	
Mailing Address 15 Garden Street			
City Cumberland	State RI	Zip Code 02864	
Purpose of Disbursement Contribution		011 Category/ Type	FEC Identification Number C Transaction ID : SB29.5526 Amount of Each Disbursement this Period 250.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
SUBTOTAL of Disbursements This Page (optional).....▶		1550.00	
TOTAL This Period (last page this line number only).....▶			

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

A. McNamara, Joseph, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 Howie Avenue

City Warwick State RI Zip Code 02888

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB29.5534

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Phillips, Robert, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 325 Dunlap Street

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB29.5489

Amount of Each Disbursement this Period: 300.00

Memo Item

C. Raptakis, Leonidas, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2080 Nooseneck Hill Road

City Coventry State RI Zip Code 02816

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C

Transaction ID : SB29.5508

Amount of Each Disbursement this Period: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1100.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

A. Raymondo, Gina, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 40794

City Providence State RI Zip Code 02940

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB29.5540

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. RI Democratic State Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6004

City Providence State RI Zip Code 02940

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB29.5547

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. RI Democratic Party

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6004

City Providence State RI Zip Code 02904

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB29.5545

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

Full Name (Last, First, Middle Initial)

A. RI Good Government

Mailing Address 33 College Hill Road

City Providence State RI Zip Code 02908

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2017

FEC Identification Number

C
Transaction ID : SB29.5528
 Amount of Each Disbursement this Period
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Serpa, Patricia, , ,

Mailing Address 194 Kimberly Lane

City West Warwick State RI Zip Code 02893

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB29.5493
 Amount of Each Disbursement this Period
 300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Solomon, Joseph, , , Jr.

Mailing Address 703 West Shore Road

City Warwick State RI Zip Code 02889

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB29.5492
 Amount of Each Disbursement this Period
 300.00

Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS

A. Ucci, Stephen, R, ,

Full Name (Last, First, Middle Initial)

Mailing Address 42 John Street, #2

City Johnston State RI Zip Code 02919

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.5512

Amount of Each Disbursement this Period: 400.00

Memo Item

B. Vella-Wilkinson, Camille, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2907 Post Road

City Warwick State RI Zip Code 02886

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB29.5521

Amount of Each Disbursement this Period: 400.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	14900.00