

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 Boston MA 02114 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 12 01 2009 through 12 31 2009

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 01 29 2010

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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED A CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY REPORTED TO BE REPORTED ON SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided in order to meet best efforts policy.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Massachusetts Republican State Congressional Committee

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		22603.34
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	65284.64									
(c) Total Receipts (from Line 19) .....	72295.04	715346.98								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137579.68	737950.32								
7. Total Disbursements (from Line 31) .....	57167.63	657538.27								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	80412.05	80412.05								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	5660.20									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	31888.02	441883.99
(ii) Unitemized .....	8818.00	172348.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	40706.02	614232.98
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	16000.00	53500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	56706.02	667732.98
12. Transfers From Affiliated/Other Party Committees .....	0.00	19212.00
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	12812.98
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	15589.02	15589.02
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	15589.02	15589.02
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	72295.04	715346.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	56706.02	699757.96

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4497.30	6681.01
(ii) Non-Federal Share.....	<b>10493.70</b>	<b>15589.02</b>
(b) Other Federal Operating Expenditures.....	<b>29990.09</b>	<b>483276.90</b>
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	44981.09	505546.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	5738.57
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	875.00	978.31
24. Independent Expenditure (use Schedule E) .....	<b>0.00</b>	<b>0.00</b>
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	<b>0.00</b>	<b>0.00</b>
26. Loan Repayments Made.....	<b>0.00</b>	<b>0.00</b>
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	235.00
(b) Political Party Committees	<b>0.00</b>	<b>0.00</b>
(c) Other Political Committees (such as PACs) .....	<b>0.00</b>	<b>0.00</b>
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	<b>0.00</b>	<b>235.00</b>
29. Other Disbursements.....	0.00	14212.00
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 .....	11311.54	130827.46
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	11311.54	130827.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	57167.63	657538.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46673.93	641949.25

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	56706.02	667732.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	56706.02	667497.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34487.39	489957.91
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	12812.98
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34487.39	477144.93

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

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

FOR LINE NUMBER: PAGE 7 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Knute Aarsheim

Mailing Address 305 Delano Rd

City State Zip Code  
Marion MA 02738

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

Name of Employer Act I, Inc. Occupation Fisherman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 30 / 2009  
Transaction ID: 00129.C177697  
Amount of Each Receipt this Period: 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Elisabeth Allison

Mailing Address 69 Pinehurst Rd.

City State Zip Code  
Belmont MA 02478

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

Name of Employer Anzi Ltd. Occupation Publishing Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 04 / 2009  
Transaction ID: 91208.C177399  
Amount of Each Receipt this Period: 100.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Brent Andersen

Mailing Address 11 Linda Avenue

City State Zip Code  
Auburn MA 01501

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

Name of Employer Occupation Operations Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 389.69

Date of Receipt: 12 / 31 / 2009  
Transaction ID: 00129.C177738  
Amount of Each Receipt this Period: 164.69  
In-Kind  
In-kind donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 364.69

**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 8 / 48  
(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)  
Geo Bentley

Mailing Address 180 Main St., Apt. B106

City State Zip Code  
Walpole MA 02081

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

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

**Transaction ID:** 91222.C177554

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
J. Leonard Bicknell

Mailing Address 46 Seaview Ave

City State Zip Code  
Marshfield MA 02050

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	9

**Transaction ID:** 91208.C177411

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Joseph Bonanca

Mailing Address 366 Warhurst Ave.

City State Zip Code  
Swansea MA 02777

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

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

**Transaction ID:** 00129.C177641

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

**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 / 48  
(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)  
Christopher Bramley  
Mailing Address 7 Pinecrest Dr.  
City State Zip Code  
Westborough MA 01581  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 12 / 29 / 2009  
Transaction ID: 00129.C177686  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Edgar Bristol  
Mailing Address 28 Union St  
City State Zip Code  
Foxborough MA 02035  
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 12 / 29 / 2009  
Transaction ID: 00129.C177656  
Amount of Each Receipt this Period 200.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael Brockelman  
Mailing Address 127 Highland St.  
City State Zip Code  
Holden MA 01520  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bowditch & Dewey Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 12 / 29 / 2009  
Transaction ID: 00129.C177683  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00  
**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 10 / 48  
(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 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 Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 12 / 22 / 2009  
**Transaction ID:** 91222.C177561  
 Amount of Each Receipt this Period: 200.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Martha Chadwick

Mailing Address 1 Avery Street, #14-F

City Boston State MA Zip Code 02111

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

Name of Employer Commonwealth of Massachusetts Occupation Govs Staff

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 12 / 04 / 2009  
**Transaction ID:** 91208.C177414  
 Amount of Each Receipt this Period: 50.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Nathan Couch

Mailing Address 5 High Rock Rd.

City Dover State MA Zip Code 02030

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 ▼ 425.00

Date of Receipt: 12 / 11 / 2009  
**Transaction ID:** 91216.C177500  
 Amount of Each Receipt this Period: 75.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00

**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 / 48  
(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)  
Darrell Crate

Mailing Address 820 Hale Street

City State Zip Code  
Beverly MA 01915

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

Name of Employer  
Affiliated Managers Group

Occupation  
CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 17 / 2009

Transaction ID: 91222.C177535

Amount of Each Receipt this Period  
5000.00

Receipt

**B.**

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 ▼  
976.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 10 / 2009

Transaction ID: 91216.C177480

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Danielle Fish

Mailing Address 18 Cooper Road

City State Zip Code  
Mansfield MA 02048

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 ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 10 / 2009

Transaction ID: 91216.C177475

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5150.00**

**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 12 / 48  
(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)  
David Fish

Mailing Address PO Box 1423

City State Zip Code  
Manchester MA 01944

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** 91216.C177518

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 16 Ocean St.

City State Zip Code  
Manchester MA 01944

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

**Transaction ID:** 00129.C177720

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Greeley

Mailing Address 187 Holmes Street

City State Zip Code  
Halifax MA 02338

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

Name of Employer Occupation  
Greeleys Oil Co. Inc Driver/Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
635.00

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

**Transaction ID:** 91216.C177464

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **290.00**

**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 / 48  
(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)  
Patricia Hackmer

Mailing Address 30 Shagbark Road  
P.O. Box 1143

City State Zip Code  
Concord MA 01742

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID:** 91216.C177482

Amount of Each Receipt this Period  
50.00

Receipt

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

Mailing Address 55 Overlook Dr.

City State Zip Code  
Westfield MA 01085

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	9

**Transaction ID:** 00129.C177584

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lorraine Hodsdon

Mailing Address 45 North St.  
Apt. 55

City State Zip Code  
Stoneham MA 02180

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	9

**Transaction ID:** 00129.C177600

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

**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 14 / 48
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Amory Houghton, Jr.		Date of Receipt
	Mailing Address 80 East Market Street Suite 300		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Corning	NY	14830
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91216.C177473
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="900.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Howard		Date of Receipt
	Mailing Address 600 West Broadway, Suite 1800		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	San Diego	CA	92101
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91222.C177581
Name of Employer Latham & Watkins LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="2500.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen Jeffries		Date of Receipt
	Mailing Address 12 Brimmer St.		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Boston	MA	02108-1002
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91216.C177521
Name of Employer S.B. Jeffries Consultants		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="208.33"/>
		<input type="text" value="2083.30"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2758.33"/>
<b>TOTAL</b> 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: PAGE 15 / 48  
(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)  
Jeanne Kangas

Mailing Address 959 Hill Rd

City State Zip Code  
Boxborough MA 01719

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

Name of Employer Occupation  
Arnold & Kangas, P.C. Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4130.00

Date of Receipt  
MM / DD / YYYY  
12 / 10 / 2009

**Transaction ID:** 91216.C177487

Amount of Each Receipt this Period  
50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
George Kariotis

Mailing Address P. O. Box 398  
721B Samoset Road

City State Zip Code  
Eastham MA 02642

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2009

**Transaction ID:** 00129.C177610

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Julianne Lindsay

Mailing Address 81 Channing Rd

City State Zip Code  
Watertown MA 02472

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

Name of Employer Occupation  
Eastern Bank banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2009

**Transaction ID:** 00129.C177625

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**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 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Joseph Luongo

Mailing Address 9 Park Avenue #701

City Hull State MA Zip Code 02045

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 12 / 10 / 2009  
**Transaction ID:** 91216.C177453  
 Amount of Each Receipt this Period: 100.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Joseph Luongo

Mailing Address 9 Park Avenue #701

City Hull State MA Zip Code 02045

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 12 / 29 / 2009  
**Transaction ID:** 00129.C177615  
 Amount of Each Receipt this Period: 100.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Mahoney

Mailing Address 37 Channing Road

City Watertown State MA Zip Code 02472

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

Name of Employer Occupation  
Free and Strong America PAC Politics

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 12 / 10 / 2009  
**Transaction ID:** 91216.C177483  
 Amount of Each Receipt this Period: 50.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

**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 17 / 48  
(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)  
Sean Malloy

Mailing Address 111 Tonawanda St.

City State Zip Code  
Boston MA 02124

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2009

Transaction ID: 91216.C177523

Amount of Each Receipt this Period  
250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Edward Michaud

Mailing Address 12 Highland St.

City State Zip Code  
Weston MA 02493

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

Name of Employer Occupation  
Self Employed Orthodontist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1425.00

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2009

Transaction ID: 00129.C177651

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Harry Mirick

Mailing Address PO Box 2731

City State Zip Code  
Orleans MA 02653

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

Transaction ID: 00129.C177708

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

**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 18 / 48  
(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)  
John Moriarty

Mailing Address 25 Prospect Street

City Winchester State MA Zip Code 01890

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

Name of Employer Moriarty and Associates Occupation Construction

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 12 / 11 / 2009

Transaction ID: 91216.C177501

Amount of Each Receipt this Period 10000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Alan Morse

Mailing Address 160 Aspinwall Avenue Unit 1

City Brookline State MA Zip Code 02446

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 12 / 31 / 2009

Transaction ID: 00129.C177709

Amount of Each Receipt this Period 100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Munson

Mailing Address 199 St. Botoph Street

City Boston State MA Zip Code 02115

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2009

Transaction ID: 91222.C177540

Amount of Each Receipt this Period 250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10350.00

**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 19 / 48  
(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)  
Ann Murphy

Mailing Address 65 Helen Street

City State Zip Code  
Waltham MA 02452

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

Name of Employer Occupation  
GPC/ONeill & Assoc. Vice President, PR Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

Transaction ID: 91216.C177525

Amount of Each Receipt this Period  
50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Thomas OConnor

Mailing Address 55 Pleasant St.

City State Zip Code  
Canton MA 02021

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

Name of Employer Occupation  
OConnor Constructors Business owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

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

Transaction ID: 91222.C177559

Amount of Each Receipt this Period  
500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
William Park

Mailing Address 36 King St

City State Zip Code  
Cohasset MA 02025

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

Name of Employer Occupation  
Boston University Professor of Law

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 9

Transaction ID: 91208.C177409

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 48  
(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)  
Eileen Perkins  
Mailing Address 163 W. River St.  
City Orange State MA Zip Code 01364  
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 ▼ 230.00  
Date of Receipt 12 / 29 / 2009  
Transaction ID: 00129.C177645  
Amount of Each Receipt this Period 50.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Lovett Peters  
Mailing Address 10 Longwood Dr #10  
City Westwood State MA Zip Code 02090  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pioneer Institute Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 7500.00  
Date of Receipt 12 / 31 / 2009  
Transaction ID: 00129.C177730  
Amount of Each Receipt this Period 5000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Pierce  
Mailing Address 11 Woodcrest Ct Apt. 2  
City South Weymouth State MA Zip Code 02190  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Street Bank Occupation Financial Advisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 12 / 22 / 2009  
Transaction ID: 91222.C177566  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5150.00  
**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 21 / 48  
(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)  
James M. Redfern  
Mailing Address 37 Conant St  
City Bridgewater State MA Zip Code 02324  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 326.00  
Date of Receipt 12 / 30 / 2009  
Transaction ID: 00129.C177692  
Amount of Each Receipt this Period 200.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Salvy Sacro  
Mailing Address Sacro Plaza 142 School St.  
City Everett State MA Zip Code 02149  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Real Estate Developer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 12 / 10 / 2009  
Transaction ID: 91216.C177478  
Amount of Each Receipt this Period 100.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Brett Schetzle  
Mailing Address 423 Essex St  
City Beverly State MA Zip Code 01915  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Procter & Gamble Occupation Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 423.00  
Date of Receipt 12 / 10 / 2009  
Transaction ID: 91216.C177486  
Amount of Each Receipt this Period 50.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 350.00  
**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 22 / 48  
(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)  
John Shaughnessy

Mailing Address 91 Longmeadow Rd.

City Milton State MA Zip Code 02186

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

Name of Employer Shaughnessy and Ahern Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 22 / 2009

Transaction ID: 91222.C177570

Amount of Each Receipt this Period 500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Sheehy

Mailing Address 330 South Main St.

City Andover State MA Zip Code 01810

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

Name of Employer Whittempre Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 29 / 2009

Transaction ID: 00129.C177675

Amount of Each Receipt this Period 200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Stanley Simon

Mailing Address 7 Fair Oaks Park

City Needham State MA Zip Code 02492

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

Name of Employer Self Employed Occupation real estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 29 / 2009

Transaction ID: 00129.C177637

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 800.00

**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 23 / 48  
(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)  
Scott Styles

Mailing Address 3609 N. Rockingham Street

City Arlington State VA Zip Code 22213

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

Name of Employer AHIP Occupation Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 11 / 2009

Transaction ID: 91216.C177508

Amount of Each Receipt this Period 1500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Sylvia Thompson

Mailing Address 26 Thayer Ave.

City Weymouth State MA Zip Code 02188

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 91216.C177450

Amount of Each Receipt this Period 25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Raymond Timmons

Mailing Address 118 Driftwood Lane

City Yarmouth State MA Zip Code 02664

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

Name of Employer GTR Manufacturing Corp. Occupation Business owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 29 / 2009

Transaction ID: 00129.C177636

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1625.00

**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 24 / 48  
(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)  
Kevin Vann  
 Mailing Address 3 Chateau Drive  
 City State Zip Code  
 South Hadley MA 01075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DVC Inc Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00  
 Date of Receipt 12 / 31 / 2009  
**Transaction ID:** 00129.C177718  
 Amount of Each Receipt this Period 100.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Francis Venditti  
 Mailing Address 160 Warren Avenue  
 City State Zip Code  
 Seekonk MA 02771-2097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer seekonk speedway Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00  
 Date of Receipt 12 / 04 / 2009  
**Transaction ID:** 91208.C177418  
 Amount of Each Receipt this Period 100.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Claudia Viglione  
 Mailing Address 4 Canal Park Apt 305  
 City State Zip Code  
 Cambridge MA 02141-2209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Boston Culinary Group Occupation Payroll Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00  
 Date of Receipt 12 / 22 / 2009  
**Transaction ID:** 91222.C177562  
 Amount of Each Receipt this Period 25.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 225.00  
**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 25 / 48  
(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)  
Calvin R. Wieggers

Mailing Address PO Box 51

City State Zip Code  
Uxbridge MA 01569

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
12 / 18 / 2009

Transaction ID: 91222.C177543

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Brad Williams

Mailing Address 29 Furbush Road

City State Zip Code  
Boston MA 02132

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
408.00

Date of Receipt  
MM / DD / YYYY  
12 / 10 / 2009

Transaction ID: 91216.C177477

Amount of Each Receipt this Period  
50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
George Young

Mailing Address 235 Walker St. Apt 252

City State Zip Code  
Lenox MA 01240

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2450.00

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2009

Transaction ID: 00129.C177623

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**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 26 / 48  
 (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)  
John Zucco

Mailing Address P.O. Box 306

City State Zip Code  
South Easton MA 02375

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

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

Transaction ID: 91216.C177528

Amount of Each Receipt this Period  
550.00

In-Kind

In-Kind donation of DJ services for party related fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 5px;">550.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px;">31888.02</span>

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

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

FOR LINE NUMBER: PAGE 27 / 48  
(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)  
NAHU PAC  
Mailing Address P.O. Box 20865  
City Indianapolis State IN Zip Code 46220  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PAC Occupation FEC ID # C00283135  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 5000.00  
Date of Receipt 12 / 23 / 2009  
Transaction ID: 00129.C177592  
Amount of Each Receipt this Period 5000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Nixon Peabody PAC  
Mailing Address Richard Pedone  
1100 Clinton Square  
City Rochester State NY Zip Code 14604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PAC Occupation FEC ID:C00404178  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 5000.00  
Date of Receipt 12 / 17 / 2009  
Transaction ID: 91222.C177530  
Amount of Each Receipt this Period 5000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
RJ Reynolds PAC  
Mailing Address P.O. Box 718  
City Winston Salem State NC Zip Code 27102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PAC Occupation FEC ID # C00042002  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 5000.00  
Date of Receipt 12 / 23 / 2009  
Transaction ID: 00129.C177593  
Amount of Each Receipt this Period 5000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00  
**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 28 / 48	
	(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"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Scully		Date of Receipt																					
	Mailing Address 1801 Edgehill Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	0	/	2	0	0	9														
	City	State	Zip Code		<b>Transaction ID:</b> 91216.C177449																			
	Alexandria	VA	22307																					
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period																				
Name of Employer Welsh, Carson, Anderson & Stow		Occupation General Partner		1000.00																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		1000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	16000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Barrows Barrows Insurance <hr/> Mailing Address 215 North Main Street <hr/> City Mansfield State MA Zip Code 02048- <hr/> Purpose of Disbursement Liability Insurance 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: 00129.E11783 Date of Disbursement 12 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 234.00 <hr/> LIABILITY INSURANCE
<b>B.</b>	Full Name (Last, First, Middle Initial) Brent Andersen <hr/> Mailing Address 11 Linda Avenue <hr/> City Auburn State MA Zip Code 01501- <hr/> Purpose of Disbursement In-kind donation 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: 00129.C177738IK Date of Disbursement 12 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 164.69 <hr/> IN KIND: IN-KIND DONATION
<b>C.</b>	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts <hr/> Mailing Address Landmark Center 401 Park Drive <hr/> City Boston State MA Zip Code 02215- <hr/> Purpose of Disbursement Health Insurance 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: 00129.E11767 Date of Disbursement 12 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 936.40 <hr/> HEALTH INSURANCE

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

1335.09

**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) Byte Bulb	Transaction ID: 00129.E11771 Date of Disbursement 12 / 03 / 2009
	Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 110.00
	City Hanover State MA Zip Code 02339-	
	Purpose of Disbursement Party related website development 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) ▼
		PARTY RELATED WEBSITE DEVELOPMENT

B.	Full Name (Last, First, Middle Initial) Kauppi Communications	Transaction ID: 00129.E11778 Date of Disbursement 12 / 03 / 2009
	Mailing Address 27 Townly Road	Amount of Each Disbursement this Period 3000.00
	City Watertown State MA Zip Code 02472-	
	Purpose of Disbursement Communications Consulting Fee - party related non FEA Candidate Name	Category/Type P
	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) ▼
		COMMUNICATIONS CONSULTING FEE - PARTY RELATED NON FEA P

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 00129.E11775 Date of Disbursement 12 / 03 / 2009
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 2415.70
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement party related telemkt fundraising 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) ▼
		PARTY RELATED TELEMKT FUNDRAISING

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

5525.70

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><b>A.</b> Full Name (Last, First, Middle Initial) Keswick Consulting</p> <p>Mailing Address 231 Victory Road</p> <p>City Quincy State MA Zip Code 02171-</p> <p>Purpose of Disbursement Political Consulting Fee - party related 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><b>Transaction ID:</b> 00129.E11781 <b>Date of Disbursement</b> 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>POLITICAL CONSULTING FEE - PARTY RELATED NON FEA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tara Esfahanian</p> <p>Mailing Address 177 Upham St.</p> <p>City Melrose State MA Zip Code 02176-</p> <p>Purpose of Disbursement Fundraising consulting fee</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><b>Transaction ID:</b> 00129.E11792 <b>Date of Disbursement</b> 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>FUNDRAISING CONSULTING FEE</p>
<p><b>C.</b> 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 Dental 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><b>Transaction ID:</b> 00129.E11776 <b>Date of Disbursement</b> 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 129.93</p> <p>DENTAL INSURANCE</p>

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

5629.93

**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><b>A.</b> Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 22 Presidents Lane</p> <p>City Quincy State MA Zip Code 02169-</p> <p>Purpose of Disbursement reimbursement for parking food travel</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><b>Transaction ID:</b> 00129.E11800 <b>Date of Disbursement</b> 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 252.95</p> <p>REIMBURSEMENT FOR PARKING FOOD TRAVEL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 22 Presidents Lane</p> <p>City Quincy State MA Zip Code 02169-</p> <p>Purpose of Disbursement reimbursement for cell phone</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><b>Transaction ID:</b> 00129.E11798 <b>Date of Disbursement</b> 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 108.41</p> <p>REIMBURSEMENT FOR CELL PHONE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Susan Keene</p> <p>Mailing Address 76 Locksley Rd.</p> <p>City Lynnfield State MA Zip Code 01940-</p> <p>Purpose of Disbursement accounting 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><b>Transaction ID:</b> 00129.E11786 <b>Date of Disbursement</b> 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 801.00</p> <p>ACCOUNTING SERVICES</p>

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

1162.36

**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)

PAGE 33 / 48

<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) Melissa Lucas	Transaction ID: 00129.E11782 Date of Disbursement 12 / 03 / 2009
	Mailing Address 22 Slayton Road	Amount of Each Disbursement this Period 2500.00
	City Melrose State MA Zip Code 02176- Purpose of Disbursement Political Consulting Fee - party related non FEA Candidate Name	POLITICAL CONSULTING FEE - PARTY RELATED NON FEA
	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) Konica Minolta Business Systems	Transaction ID: 00129.E11779 Date of Disbursement 12 / 03 / 2009
	Mailing Address P.O. Box 7247-0322	Amount of Each Disbursement this Period 955.08
	City Philadelphia State PA Zip Code 19170-0322 Purpose of Disbursement copier lease Candidate Name	COPIER LEASE
	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) Jennifer Nassour	Transaction ID: 00129.E11785 Date of Disbursement 12 / 03 / 2009
	Mailing Address 49 Chelsea St., Unit C1-307	Amount of Each Disbursement this Period 137.64
	City Boston State MA Zip Code 02129- Purpose of Disbursement Reimbursement for parkingfood and travel Candidate Name	REIMBURSEMENT FOR PARKIN-GFOOD AND TRAVEL
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3592.72</b>
<b>TOTAL</b> 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

<b>A.</b> Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114- Purpose of Disbursement Rent and Utilities 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: 00129.E11788 Date of Disbursement 12 / 03 / 2009
	Amount of Each Disbursement this Period 4795.03 RENT AND UTILITIES

<b>B.</b> Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement payroll fee 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: 00129.E11807 Date of Disbursement 12 / 10 / 2009
	Amount of Each Disbursement this Period 74.16 PAYROLL FEE

<b>C.</b> Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement payroll tax 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: 00129.E11809 Date of Disbursement 12 / 10 / 2009
	Amount of Each Disbursement this Period 2344.73 PAYROLL TAX

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7213.92
<b>TOTAL</b> 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 35 / 48

<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: 00129.E11808 Date of Disbursement 12 / 24 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 74.16
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement payroll 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) ▼
		PAYROLL FEE

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 00129.E11810 Date of Disbursement 12 / 24 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 2345.84
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement payroll tax	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 TAX

C.	Full Name (Last, First, Middle Initial) Poland Spring Poland Spring	Transaction ID: 00129.E11789 Date of Disbursement 12 / 03 / 2009
	Mailing Address Processing Center PO Box 52271	Amount of Each Disbursement this Period 11.68
	City Phoenix State AZ Zip Code 85072-	
	Purpose of Disbursement Bottled Water	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BOTTLED WATER

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

2431.68

**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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Boston Postmaster  Mailing Address JW MCCORMACK STATION New Chardon Street  City Boston State MA Zip Code 02114-  Purpose of Disbursement non-fea party related postage Candidate Name <span style="float: right;">Category/Type</span>  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: 00129.E11802 Date of Disbursement 12 / 16 / 2009  Amount of Each Disbursement this Period 660.00  NON-FEA PARTY RELATED POSTAGE
<b>B.</b>	Full Name (Last, First, Middle Initial) Sprint/Nextel  Mailing Address PO Box 17990  City Denver State CO Zip Code 80217-  Purpose of Disbursement cell phone Candidate Name <span style="float: right;">Category/Type</span>  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: 00129.E11790 Date of Disbursement 12 / 03 / 2009  Amount of Each Disbursement this Period 91.22  CELL PHONE
<b>C.</b>	Full Name (Last, First, Middle Initial) Staples, Inc.  Mailing Address Staples Credit Plan Dept. 80 - 0088936796  City Des Moines State IA Zip Code 50368-9020  Purpose of Disbursement Office Supplies Candidate Name <span style="float: right;">Category/Type</span>  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: 00129.E11791 Date of Disbursement 12 / 03 / 2009  Amount of Each Disbursement this Period 48.05  OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>799.27</b>
<b>TOTAL</b> 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 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

<b>A.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement Direct Mail-party related 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) ▼	Transaction ID: 00129.E11773 Date of Disbursement 12 / 03 / 2009
	Amount of Each Disbursement this Period 765.00 DIRECT MAIL-PARTY RELATED NON FEA

<b>B.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement Direct Mail - party related non FEC 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: 00129.E11774 Date of Disbursement 12 / 10 / 2009
	Amount of Each Disbursement this Period 875.00 DIRECT MAIL - PARTY RELAT- ED NON FEC

<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Verizon Wireless Mailing Address PO Box 5029 City Wallingford State CT Zip Code 06492- Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00129.E11801 Date of Disbursement 12 / 03 / 2009
	Amount of Each Disbursement this Period 106.04 CELL PHONE

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

1746.04

**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 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) John Zucco			Transaction ID: 91216.C177528IK Date of Disbursement																					
	Mailing Address P.O. Box 306			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	0	9	/	2	0	0	9																
	City South Easton	State MA	Zip Code 02375-	Amount of Each Disbursement this Period																					
	Purpose of Disbursement In-Kind donation of DJ services for party related fundraising event			<table border="1"> <tr> <td colspan="10">550.00</td> </tr> </table>			550.00																		
550.00																									
	Candidate Name			Category/ Type																					
	Office Sought:	Disbursement For:																							
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
	State:	District:																							
				IN KIND: IN-KIND DONATION OF DJ SERVICES FOR PARTY RELATED FUNDRAISING EVENT																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>29986.71</b>

**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 39 / 48

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
Scott Brown for US Senate Committee

Mailing Address PO BOX 395

City Wrentham State MA Zip Code 02093-

Purpose of Disbursement  
IN-KIND DONATION OF POSTAGE FOR FUNDRAIS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00129.E11766

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2009

Amount of Each Disbursement this Period

875.00

IN KIND: IN-KIND DONATION  
OF POSTAGE FOR FUNDRAISING  
MAILING

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

875.00

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

875.00

# 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"/> 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><b>A.</b> Full Name (Last, First, Middle Initial) Nick Connors</p> <p>Mailing Address 74 Green Street</p> <p>City Stoneham State MA Zip Code 02180-</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><b>Transaction ID:</b> 00129.E11805</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1938.87"/></p> <p>PAYROLL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nick Connors</p> <p>Mailing Address 74 Green Street</p> <p>City Stoneham State MA Zip Code 02180-</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><b>Transaction ID:</b> 00129.E11806</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1938.87"/></p> <p>PAYROLL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tarah Donoghue</p> <p>Mailing Address 3 Main Street</p> <p>City Dover State MA Zip Code 02030-</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><b>Transaction ID:</b> 00129.E11811</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1584.79"/></p> <p>PAYROLL</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="5462.53"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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"/> 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) Tarah Donoghue	Transaction ID: 00129.E11812 Date of Disbursement 12 / 24 / 2009
	Mailing Address 3 Main Street	Amount of Each Disbursement this Period 1584.78
	City Dover State MA Zip Code 02030-	
	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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 00129.E11796 Date of Disbursement 12 / 10 / 2009
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 657.37
	City Boston State MA Zip Code 02131-	
	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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 00129.E11797 Date of Disbursement 12 / 24 / 2009
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 657.38
	City Boston State MA Zip Code 02131-	
	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) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2899.53
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 00129.E11804 Date of Disbursement 12 / 10 / 2009
	Mailing Address 22 Presidents Lane	Amount of Each Disbursement this Period 1315.14
	City Quincy State MA Zip Code 02169-	
	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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 00129.E11803 Date of Disbursement 12 / 24 / 2009
	Mailing Address 22 Presidents Lane	Amount of Each Disbursement this Period 1315.13
	City Quincy State MA Zip Code 02169-	
	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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 00129.E11794 Date of Disbursement 12 / 10 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 157.42
	City Lynn State MA Zip Code 01902-	
	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) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2787.69
<b>TOTAL</b> 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

A.

Full Name (Last, First, Middle Initial)

Brett Kasper

Mailing Address 43 Eastern Ave. Apt. 3

City Lynn State MA Zip Code 01902-

Purpose of Disbursement payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00129.E11795

Date of Disbursement

12 / 24 / 2009

Amount of Each Disbursement this Period

161.79

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

161.79

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

11311.54

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		<b>Transaction ID:</b> LS90513.E11275	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		<b>Transaction ID:</b> LS90513.E11276	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		<b>Transaction ID:</b> LS90513.E11277	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1250.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1750.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 / 48
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Original Debt for telemar- keting non-fea party rela- ted
Mailing Address 7300 Hudson Blvd. Ste	
City State ZIP Code Saint Paul MN 55128-	

Outstanding Balance Beginning This Period	<b>Transaction ID: LS91217.E11763</b>	
3910.20		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3910.20

1) <b>SUBTOTALS</b> This Period This Page (optional).....	3910.20
2) <b>TOTALS</b> This Period (last page this line number only).....	5660.20
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	5660.20

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

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NAME OF COMMITTEE (In Full)

**Massachusetts Republican State Congressional Committee****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

**FORMER GOVERNORS RECEPTION**

ACTIVITY IS:

 Fundraising       Direct Candidate Support

CHECK IF THE RATIO IS:

 New       Revised       Same as Previously Reported

FEDERAL %

30.00 %

NONFEDERAL %

70.00 %

Transaction ID:  
H2191208.J67

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

NAME OF ACCOUNT  
 Committee Mass Rep-  
 ublican Stat 85 Me-  
 rr

DATE OF RECEIPT

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

TOTAL AMOUNT TRANSFERRED

15589.02

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

0.00

Transaction ID: HB91216.C177529

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) FORMER GOVERNORS  
 RECEPTION

15589.02

Transaction ID: H391216.C177529

b) \_\_\_\_\_

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

15589.02

v) Direct Candidate Support (List of Activity or Event Identifier)

a) \_\_\_\_\_

Transaction ID:

b) \_\_\_\_\_

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

0.00

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

15589.02

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

15589.02

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Melissa Lucas

Mailing Address  
22 Slayton Road

City	State	Zip Code
Melrose	MA	02176-

Purpose of Disbursement:  
Fundraising consulting fee for party related fund-  
raising event

Activity or Event Identifier:  
FORMER GOVERNORS RECEPTION

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
22270.03

Date  /  /   
**Transaction ID:** H491222.E11764

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2250.00		5250.00		7500.00

**B. Full Name (Last, First, Middle Initial)**  
Tara Esfahanian

Mailing Address  
177 Upham St.

City	State	Zip Code
Melrose	MA	02176-

Purpose of Disbursement:  
Fundraising consulting fee for party related fund-  
raising event

Activity or Event Identifier:  
FORMER GOVERNORS RECEPTION

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
14770.03

Date  /  /   
**Transaction ID:** H491222.E11765

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2247.30		5243.70		7491.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4497.30		10493.70		14991.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
4497.30		10493.70		14991.00