

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		90494.34
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	103613.58									
(c) Total Receipts (from Line 19)	121156.20	2229734.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	224769.78	2320228.84								
7. Total Disbursements (from Line 31)	135776.89	2231235.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	88992.89	88992.89								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	29698.54									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	111450.00	1895625.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	8327.00	198913.49
(iii) TOTAL (add Lines 11(a)(i) and (ii)	119777.00	2094538.49
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	100.00	103450.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	119877.00	2197988.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	5466.81
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1279.20	26279.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	121156.20	2229734.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	121156.20	2229734.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	98486.18	1459143.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	98486.18	1459143.90
22. Transfers to Affiliated/Other Party Committees.....	19000.00	408050.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	18290.71	364042.05
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	18290.71	364042.05
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	135776.89	2231235.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	135776.89	2231235.95

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	119877.00	2197988.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	119877.00	2197988.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	98486.18	1459143.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	5466.81
38. Net Operating Expenditures (subtract Line 37 from Line 36)	98486.18	1453677.09

Form/Schedule : **F3XA**

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 WAS 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.

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

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

FOR LINE NUMBER: PAGE 7 / 62
(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)
James Alex
Mailing Address 112 Abbot Street
City State Zip Code
Andover MA 01810
FEC ID number of contributing federal political committee. **C**
Name of Employer Atlantic Retail Properties Occupation real estate
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 12500.00
Date of Receipt 10 / 12 / 2006
Transaction ID: 61016.C162291
Amount of Each Receipt this Period 10000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Bryan Anderson
Mailing Address 21 Stonecrest Drive
City State Zip Code
Needham MA 02492
FEC ID number of contributing federal political committee. **C**
Name of Employer Atlantic Retail Properties Occupation Executive
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 10 / 05 / 2006
Transaction ID: 61016.C162082
Amount of Each Receipt this Period -5000.00
Memo
[MEMO ITEM] transfer excess funds from fed to non fed

C. Full Name (Last, First, Middle Initial)
Gerardo Andreottola
Mailing Address 6 Burbank Road
City State Zip Code
Medford MA 02155
FEC ID number of contributing federal political committee. **C**
Name of Employer Boston Hides & Furs Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 17 / 2006
Transaction ID: 61019.C162452
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 10500.00
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 8 / 62

(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)
Janet Bayley

Mailing Address 1002 Paradise Rd
DO NOT MAIL

City State Zip Code
Swampscott MA 01907

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

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

Transaction ID: 61016.C162160

Amount of Each Receipt this Period

200.00

Receipt

B.

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

Mailing Address 407 Warren Street

City State Zip Code
Brookline MA 02445

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

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

Transaction ID: 61016.C162204

Amount of Each Receipt this Period

500.00

Receipt

C.

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

Mailing Address 133 Weston Rd.

City State Zip Code
Lincoln MA 01773

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 ▼ 1000.00

Date of Receipt

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

Transaction ID: 61016.C162310

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

1200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 62
	<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) Elizabeth Brennan		Date of Receipt
	Mailing Address 5 Charles River Square DO NOT MAIL - AMG ISSUE		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Boston	MA	02114
	FEC ID number of contributing federal political committee. C		Transaction ID: 61016.C162290
Name of Employer Home		Occupation Home	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="10000.00"/>
		<input type="text" value="10000.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Arlene Cassis		Date of Receipt
	Mailing Address 35 Wycliffe Rd.		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	East Walpole	MA	02032
	FEC ID number of contributing federal political committee. C		Transaction ID: 61016.C162058
Name of Employer Self Employed		Occupation Investments	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="250.00"/>
		<input type="text" value="250.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Thomas A. Ciano		Date of Receipt
	Mailing Address 67 Oxford Street		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Winchester	MA	01890-2422
	FEC ID number of contributing federal political committee. C		Transaction ID: 61016.C162109
Name of Employer Information Requested		Occupation Insurance Broker	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="500.00"/>
		<input type="text" value="500.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 62
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Michael Cimini

Mailing Address 8 Sidney Rd.

City State Zip Code
Sturbridge MA 01566

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

Name of Employer Occupation
Yankee Spirits President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2006

Transaction ID: 61016.C162214

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Donald Clark

Mailing Address 145 Granville Rd.

City State Zip Code
Westfield MA 01085

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
10 / 16 / 2006

Transaction ID: 61019.C162338

Amount of Each Receipt this Period
300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Coghlin

Mailing Address 6 Almondwood Circle

City State Zip Code
Shrewsbury MA 01545

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2006

Transaction ID: 61016.C162112

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**

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 / 62

(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)

Brian Conway

Mailing Address 301 Otis Street

City State Zip Code
Newton MA 02465

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

Name of Employer Occupation
TA Associates investor

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

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

Transaction ID: 61019.C162460

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

J.W. Cranney

Mailing Address PO Box 55

City State Zip Code
Belmont MA 02478

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

Name of Employer Occupation
Self Employed Consultant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 6000.00

Date of Receipt

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

Transaction ID: 61016.C162298

Amount of Each Receipt this Period

6000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Peter Crisci

Mailing Address 6A Patriots Way

City State Zip Code
Sterling MA 01564-2370

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

Name of Employer Occupation
Acromatic Plastics President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61019.C162456

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

11500.00

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 / 62
(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)
James Cummings

Mailing Address 16 Popple Grove Road

City Harwich State MA Zip Code 02645

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 10 / 03 / 2006

Transaction ID: 61016.C162063

Amount of Each Receipt this Period 100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Francis DAmbrosio

Mailing Address 107 Caterina Heights

City Concord State MA Zip Code 01742

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

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 12 / 2006

Transaction ID: 61016.C162217

Amount of Each Receipt this Period 500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Gerald Eckman

Mailing Address 161 N. Pepperell Road

City Hollis State NH Zip Code 03049

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

Name of Employer Reeds Ferry Lumber Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 10 / 2006

Transaction ID: 61016.C162114

Amount of Each Receipt this Period 200.00

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 13 / 62
(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)
S. Warren Farrell

Mailing Address 60 Summit Road

City Belmont State MA Zip Code 02478

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 ▼ 600.00

Date of Receipt: 10 / 12 / 2006
Transaction ID: 61016.C162215
Amount of Each Receipt this Period: 500.00
Receipt

B.

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

Mailing Address 30 Elizabeth Road

City Hopkinton State MA Zip Code 01748

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

Name of Employer Emc Corporation Occupation Vice President Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 12 / 2006
Transaction ID: 61016.C162213
Amount of Each Receipt this Period: 2500.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Peter Flynn

Mailing Address 3 Crownridge Rd.

City Westborough State MA Zip Code 01581

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

Name of Employer National Grid USA Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt: 10 / 12 / 2006
Transaction ID: 61016.C162201
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 62

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Michael Frisoli

Mailing Address 13 Stagg Drive

City State Zip Code
Natick MA 01760

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

Name of Employer Occupation
Unemployed airport manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 61016.C162111

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ernest Frohring

Mailing Address 60 Bulkeley Road

City State Zip Code
Littleton MA 01460

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

Name of Employer Occupation
TriLogic Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 61016.C162300

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Patricia Gamble

Mailing Address 175 Huguenot Street, PH 501

City State Zip Code
New Rochelle NY 10801

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

Name of Employer Occupation
Gamble Insurance Services Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: 61016.C162116

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

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 15 / 62
(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)
Jane Gillespie
 Mailing Address 19 Ward St.
 City State Zip Code
 Woburn MA 01801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed rental service Inc.
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 6
Transaction ID: 61016.C162330
 Amount of Each Receipt this Period
 250.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Robert Goldbaum
 Mailing Address 1 Gussett Rd
 City State Zip Code
 Wenham MA 01984-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Simpson, Thatcher & Bartlett Attorney
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 12500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 0 / 2 0 0 6
Transaction ID: 61016.C162108
 Amount of Each Receipt this Period
 10000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Alfred Goldstein
 Mailing Address 3 Royal Crest Drive
 Apt. #11
 City State Zip Code
 North Andover MA 01845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 2 / 2 0 0 6
Transaction ID: 61016.C162301
 Amount of Each Receipt this Period
 2500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 12750.00
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 / 62
(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)
Thomas Greene

Mailing Address 65 Chelsea St.
Unit 201

City Boston State MA Zip Code 02129

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 12 / 2006
Transaction ID: 61016.C162211
Amount of Each Receipt this Period 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Charles Haydock

Mailing Address 164 Beacon Street
No. 9

City Boston State MA Zip Code 02116

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

Name of Employer Welch & Forbes Occupation Investment Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 03 / 2006
Transaction ID: 61016.C162070
Amount of Each Receipt this Period 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
William Hofmann

Mailing Address 223 Rutledge Road

City Belmont State MA Zip Code 02478

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

Name of Employer Self Employed Occupation insurance agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 12 / 2006
Transaction ID: 61016.C162209
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 62
(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)
Edward Johnson

Mailing Address 56 North St

City State Zip Code
Grafton MA 01519

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

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

Transaction ID: 61019.C162362

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jose Jorge

Mailing Address 118 Inman Street
Apt.1

City State Zip Code
Cambridge MA 02139

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

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

Transaction ID: 61016.C162325

Amount of Each Receipt this Period
50.00

Receipt

C. 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 Arnold & Kangas, P.C. Occupation Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00

Date of Receipt

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

Transaction ID: 61019.C162334

Amount of Each Receipt this Period
250.00

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 18 / 62
(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 Kennedy
 Mailing Address 39 Gibson Street
 City Boston State MA Zip Code 02122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Plumber
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 10 / 16 / 2006
Transaction ID: 61019.C162337
 Amount of Each Receipt this Period 500.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Thomas King
 Mailing Address PO Box 605
DO NOT MAIL
 City Chatham State MA Zip Code 02633
 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 ▼ 750.00
 Date of Receipt 10 / 10 / 2006
Transaction ID: 61016.C162103
 Amount of Each Receipt this Period 250.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Gloria Kinney
 Mailing Address 202 Waltham St
 City Lexington State MA Zip Code 02421
 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 10 / 10 / 2006
Transaction ID: 61016.C162184
 Amount of Each Receipt this Period 100.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 850.00
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 / 62
(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)
Richard Kircher
Mailing Address 32 Green Needle Lane
City Rowley State MA Zip Code 01969-1722
FEC ID number of contributing federal political committee. **C**
Name of Employer Putnam Investments Occupation Compliance Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00
Date of Receipt 10 / 16 / 2006
Transaction ID: 61019.C162339
Amount of Each Receipt this Period 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth Kumph
Mailing Address 35 Nelson Street
City Georgetown State MA Zip Code 01833
FEC ID number of contributing federal political committee. **C**
Name of Employer premier builders Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 10 / 18 / 2006
Transaction ID: 61019.C162458
Amount of Each Receipt this Period 10000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Francis Lehar
Mailing Address 11 Norwood Avenue
City Manchester State MA Zip Code 01944
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 ▼ 1975.00
Date of Receipt 10 / 16 / 2006
Transaction ID: 61016.C162331
Amount of Each Receipt this Period 25.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 10125.00
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 / 62

(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)
Caleb Loring

Mailing Address 567 Hale Street
Box 235

City State Zip Code
Prides Crossing MA 01965

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: 61016.C162059

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Caleb Loring

Mailing Address P.O. Box 235

City State Zip Code
Prides Crossing MA 01965

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61019.C162453

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Peter Maich

Mailing Address 15 Linden Drive

City State Zip Code
Cohasset MA 02025

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

Name of Employer Occupation
Information Requested Retailer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2750.00

Date of Receipt

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

Transaction ID: 61016.C162302

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

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 / 62
(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)

Laura Mateo

Mailing Address 501 Glen Road

City State Zip Code
Weston MA 02493

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

Name of Employer Occupation
Housewife Housewife

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: 61019.C162333

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lisa Matthews

Mailing Address 621 Country Way

City State Zip Code
Scituate MA 02066

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

Name of Employer Occupation
North American Management Corp Financial Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: 61019.C162416

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sally McKittrick

Mailing Address 10 North Hill Rd.

City State Zip Code
Westford MA 01886

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 ▼ 200.00

Date of Receipt

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

Transaction ID: 61016.C162193

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5350.00

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 / 62
(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)
Owen McNamara

Mailing Address 2 Third Street

City State Zip Code
Leominster MA 01453

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2006

Transaction ID: 61016.C162216

Amount of Each Receipt this Period
500.00

Receipt

B.

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

Mailing Address 64 Stone Hedge Ln.

City State Zip Code
Attleboro MA 02703

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2006

Transaction ID: 61016.C162316

Amount of Each Receipt this Period
100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Albert Merck

Mailing Address 1010 Waltham St F-19

City State Zip Code
Lexington MA 02421-8048

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 ▼ 13000.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2006

Transaction ID: 61016.C162086

Amount of Each Receipt this Period
-4000.00

Memo

[MEMO ITEM]
transfer excess contrib from fed to non fed

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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 / 62
(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)
Jack Messman

Mailing Address 22 Pelham Road

City State Zip Code
Weston MA 02493

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

Transaction ID: 61016.C162261

Amount of Each Receipt this Period
100.00

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 Self Employed Occupation Orthodontist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61016.C162117

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Bruce Mittman

Mailing Address 14 Longmeadow Road

City State Zip Code
Newton MA 02459

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

Name of Employer Mittcom Inc. Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61016.C162332

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 2100.00

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 / 62
(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)
Vasilios Mourmoutis

Mailing Address 1 Avery Street #27c

City State Zip Code
Boston MA 02111

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

Name of Employer Self Employed Occupation Dentist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

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

Transaction ID: 61016.C162208

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Mumford

Mailing Address 105 Farm Lane
PO Box 278

City State Zip Code
Westwood MA 02090

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	6

Transaction ID: 61019.C162421

Amount of Each Receipt this Period
75.00

Receipt

C. Full Name (Last, First, Middle Initial)
Carl Nazzaro

Mailing Address 941 Humphrey St.

City State Zip Code
Swampscott MA 01907

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

Name of Employer MBTA Occupation Foreman

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	6

Transaction ID: 61016.C162071

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **675.00**

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 / 62
(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)
Allan Nelson

Mailing Address 1 Southwick Rd.

City State Zip Code
North Reading MA 01864

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

Transaction ID: 61016.C162145

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ford ONeil

Mailing Address PO Box 329
22 Paine Ave

City State Zip Code
Prides Crossing MA 01965

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

Name of Employer Occupation
Fidelity Investments Portfolio Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: 61019.C162457

Amount of Each Receipt this Period
5000.00

Receipt

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

Mailing Address 13 Steel Road

City State Zip Code
Hopedale MA 01747

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

Name of Employer Occupation
Jaco Electronics Corp Vice Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: 61016.C162084

Amount of Each Receipt this Period
-5000.00

Memo

[MEMO ITEM]
transfer excess contrib
from fed to non fed

SUBTOTAL of Receipts This Page (optional) ► 5100.00

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 / 62

(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)
Vincent Osterman

Mailing Address P.O. Box 29
DO NOT MAIL

City State Zip Code
Northbridge MA 01588

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

Name of Employer Occupation
Best Effort Sent Best Effort Sent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: 61016.C162329

Amount of Each Receipt this Period

1000.00

Receipt

B.

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

Mailing Address 1 Ellis Rd.

City State Zip Code
Swampscott MA 01907

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

Name of Employer Occupation
Self Employed Consultant

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 0 / 1 2 / 2 0 0 6

Transaction ID: 61016.C162205

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Gary Peters

Mailing Address 9 Catie Drive

City State Zip Code
Westborough MA 01581-3830

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

Name of Employer Occupation
Self-Employed Physician

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 0 / 1 2 / 2 0 0 6

Transaction ID: 61016.C162238

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 62
(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)
Richard Phipps

Mailing Address 1180 Main Street

City State Zip Code
Wakefield MA 01880

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

Name of Employer Self Employed Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: 61016.C162192

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Peter Prudden

Mailing Address 896 Graves Road

City State Zip Code
Conway MA 01341

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

Transaction ID: 61016.C162185

Amount of Each Receipt this Period
100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Grant Rodkey

Mailing Address 11 Beatrice Circle

City State Zip Code
Belmont MA 02478

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

Name of Employer VA Boston Healthcare System Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61016.C162113

Amount of Each Receipt this Period
100.00

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 28 / 62
(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)
Una Ryan

Mailing Address 329 Hammond Street

City State Zip Code
Chestnut Hill MA 02467-1207

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

Name of Employer AVANT Immunotherapeutics Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: 61016.C162107

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Helen Sayles

Mailing Address 95 Lanes End

City State Zip Code
Concord MA 01742

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

Name of Employer Liberty Mutual Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: 61019.C162335

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Bruce Scofield

Mailing Address PO Box 193

City State Zip Code
Orleans MA 02643

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

Name of Employer Courier Environmental Assembly Occupation Industrial Hygenist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: 61016.C162081

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 29 / 62
(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)
Rosmarie Scully

Mailing Address 30 Somerset Street
DO NOT MAIL DUP

City Belmont State MA Zip Code 02478

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

Name of Employer Scully Signal Co. Occupation Manufacturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 10 / 2006
Transaction ID: 61016.C162122
Amount of Each Receipt this Period 250.00
Receipt

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

Mailing Address 38 Orchard St.

City Boston State MA Zip Code 02130

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

Name of Employer Self Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 12 / 2006
Transaction ID: 61016.C162199
Amount of Each Receipt this Period 100.00
Receipt

C. 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 ▼ 300.00

Date of Receipt 10 / 10 / 2006
Transaction ID: 61016.C162187
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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 30 / 62
(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)
Margaret Sides

Mailing Address 27 R Brown Street

City State Zip Code
Marblehead MA 01945

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2006

Transaction ID: 61016.C162280

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
David Spieler

Mailing Address 40 Lawson Road
DO NOT MAIL

City State Zip Code
Winchester MA 01890

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

Name of Employer Information Requested Occupation Information Requested
Duff & Phelps, LLC Business Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2006

Transaction ID: 61016.C162289

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Donal Tobin

Mailing Address 55 Forbes Road

City State Zip Code
Westwood MA 02090-2221

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

Name of Employer Information Requested Occupation Information Requested
The Gillette Co. Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2006

Transaction ID: 61019.C162455

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 62
(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) Peter Torkildsen		Date of Receipt MM / DD / YYYY 10 / 10 / 2006
Mailing Address 1 Stony Brook Road		Transaction ID: 61016.C162118
City Chelmsford	State MA	Zip Code 01863
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Joseph Trustey		Date of Receipt MM / DD / YYYY 10 / 03 / 2006
Mailing Address 3 William Fairfield Drive		Transaction ID: 61016.C162069
City Wenham	State MA	Zip Code 01984
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Summit Partners	Occupation Venture Capital	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) Kristine Trustey		Date of Receipt MM / DD / YYYY 10 / 03 / 2006
Mailing Address 3 William Fairfield Drive		Transaction ID: 61016.C162079
City Wenham	State MA	Zip Code 01984
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Housewife	Occupation Housewife	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	10100.00
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 32 / 62
(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)
Richard Valentine

Mailing Address 135 Wood Rd.

City Braintree State MA Zip Code 02184

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

Name of Employer F-1 Boston Occupation Business owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 12 / 2006
Transaction ID: 61016.C162295
Amount of Each Receipt this Period: 5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Peter Voss

Mailing Address One Charles Street South Apt 7-H

City Boston State MA Zip Code 02116

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 10 / 03 / 2006
Transaction ID: 61016.C162060
Amount of Each Receipt this Period: 2500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Peter Voss

Mailing Address One Charles Street South Apt 7-H

City Boston State MA Zip Code 02116

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 ▼ 4500.00

Date of Receipt: 10 / 17 / 2006
Transaction ID: 61019.C162454
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 8500.00

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 33 / 62
(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 Wahr

Mailing Address 1 Seneca Cir

City State Zip Code
Andover MA 01810

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

Name of Employer Information Requested Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: 61016.C162203

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Walter Weld

Mailing Address 29 Main St.

City State Zip Code
Dover MA 02030

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

Name of Employer None Occupation
Retired

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 0 / 1 2 / 2 0 0 6

Transaction ID: 61016.C162286

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 11 Checkerberry Cir.

City State Zip Code
Sudbury MA 01776

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

Name of Employer Thomas Oconner Occupation
Civil Engineer

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 0 / 1 7 / 2 0 0 6

Transaction ID: 61019.C162443

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 34 / 62

(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)

Mary Young

Mailing Address 142 Newport St.

City State Zip Code
Arlington MA 02476

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

Name of Employer Information Requested

Occupation Information Requested

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 61016.C162210

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Edward Zuker

Mailing Address 185 Baldpate Hill Road

City State Zip Code
Newton MA 02459

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

Name of Employer Chestnut Hill Realty

Occupation Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 61019.C162459

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

111450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 62	
	(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

A.	Full Name (Last, First, Middle Initial) Matt Kinnaman Committee		Date of Receipt
	Mailing Address PO Box 503		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Lee	MA	01238
	FEC ID number of contributing federal political committee.		Transaction ID: 61016.C162080
	C		Amount of Each Receipt this Period
Name of Employer Candidate Committee		Occupation	
		CPF ID:14580	
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		100.00	
<input type="checkbox"/> Other (specify) ▼			

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	▶	<input type="text" value="100.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 62
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) United States Postal Service		Date of Receipt
Mailing Address Fort Point Station Dorchester Avenue		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Boston	State MA	Zip Code 02215-
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 61019.C162336
Name of Employer	Occupation	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="1279.20"/>
		Other Receipt
		note: refund from USPS for over paid postage, non fea no federal candidate

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1279.20"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1279.20"/>

**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 37 / 62

<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) SCM Associates	Transaction ID: 61026.E9263 Date of Disbursement 10 / 16 / 2006
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 3439.70
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail and Telemarketing non fea no fed candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	DIRECT MAIL AND TELEMARKETING NON FEA NO FED CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Accurint Accurint	Transaction ID: 61016.E9223 Date of Disbursement 10 / 05 / 2006
	Mailing Address PO Box 7247-6157	Amount of Each Disbursement this Period 177.50
	City Philadelphia State PA Zip Code 19170-	
	Purpose of Disbursement General printing non-fed no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	GENERAL PRINTING NON-FED NO FEDERAL CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Brandon Barber	Transaction ID: 61026.E9271 Date of Disbursement 10 / 12 / 2006
	Mailing Address 106 Kendall Pond Rd.	Amount of Each Disbursement this Period 363.47
	City Windham State NH Zip Code 03087-	
	Purpose of Disbursement Reimbursement See: Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT SEE: BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	3980.67
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) Boy Genius- Boy Genius Inc.	Transaction ID: 61016.E9221 Date of Disbursement 10 / 05 / 2006
	Mailing Address PO Box 61	
	City Pascoag State RI Zip Code 02859-	Amount of Each Disbursement this Period 570.00
	Purpose of Disbursement Web Hosting 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) ▼
		WEB HOSTING

B.	Full Name (Last, First, Middle Initial) Cambridge Offset Printing	Transaction ID: 61016.E9220 Date of Disbursement 10 / 05 / 2006
	Mailing Address 56 Creighton Street	
	City Cambridge State MA Zip Code 02140-	Amount of Each Disbursement this Period 2072.75
	Purpose of Disbursement general printing non-fea no federal candidate 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) ▼
		GENERAL PRINTING NON-FEA NO FEDERAL CANDIDATE

C.	Full Name (Last, First, Middle Initial) CT Caroroll Travel	Transaction ID: 61026.E9256 Date of Disbursement 10 / 12 / 2006
	Mailing Address 201 Massachusetts Ave. NE Suite C-	
	City Washington State DC Zip Code 20002-	Amount of Each Disbursement this Period 351.80
	Purpose of Disbursement Travel airfare for speaker non fea no elec. communications 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) ▼
		TRAVEL AIRFARE FOR SPEAKER NON FEA NO ELEC. COMMUNICATIONS

SUBTOTAL of Disbursements This Page (optional)	2994.55
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) Darrell Crate	Transaction ID: 61016.E9219 Date of Disbursement 10 / 05 / 2006
	Mailing Address 820 Hale Street	Amount of Each Disbursement this Period 302.40
	City Beverly State MA Zip Code 01915-	
	Purpose of Disbursement Reimbursement: See below	REIMBURSEMENT: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Union Club- Boston The Union Club	Transaction ID: 61016.E9226 Date of Disbursement 10 / 05 / 2006
	Mailing Address 8 Park Street	Amount of Each Disbursement this Period 302.40
	City Boston State MA Zip Code 02108-	
	Purpose of Disbursement D.Crate reimbursement for food for staff meeting	[MEMO ITEM] MEMO: D.CRATE REIMBURSEMENT FOR FOOD FOR STAFF MEETING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Hui Jojo Deng	Transaction ID: 61016.E9217 Date of Disbursement 10 / 05 / 2006
	Mailing Address 117 Beaconsfield Road	Amount of Each Disbursement this Period 1023.00
	City Brookline State MA Zip Code 02445-	
	Purpose of Disbursement Accounting Service- general accounting non-fea	ACCOUNTING SERVICE- GENERAL ACCOUNTING 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) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	1325.40
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) DirecTV DirecTV	Transaction ID: 61026.E9258 Date of Disbursement 10 / 16 / 2006
	Mailing Address PO Box 60036	
	City Los Angeles State CA Zip Code 90060-0036	Amount of Each Disbursement this Period 144.90
	Purpose of Disbursement Cable Service	Category/ Type CABLE SERVICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brian Dodge	Transaction ID: 61026.E9275 Date of Disbursement 10 / 12 / 2006
	Mailing Address 10 Parker Road	
	City Groveland State MA Zip Code 01834-	Amount of Each Disbursement this Period 264.55
	Purpose of Disbursement Reimbursement: See Below	Category/ Type REIMBURSEMENT: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brian Dodge	Transaction ID: 61026.E9276 Date of Disbursement 10 / 12 / 2006
	Mailing Address 10 Parker Road	
	City Groveland State MA Zip Code 01834-	Amount of Each Disbursement this Period 86.80
	Purpose of Disbursement B.Dodges reimbursement for personal car usage	Category/ Type [MEMO ITEM] MEMO: B.DODGES REIMBURSEM- ENT FOR PERSONAL CAR USAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	409.45
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) Lowell Doubletree Hotel	Transaction ID: 61026.E9259 Date of Disbursement 10 / 16 / 2006
	Mailing Address 50 Warren Street	Amount of Each Disbursement this Period 4000.00
	City Lowell State MA Zip Code 01852-	
	Purpose of Disbursement Event room rental fee non fea no fed candidate	EVENT ROOM RENTAL FEE NON FEA NO FED CANDIDATE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ENLisson ENIlsson	Transaction ID: 61016.E9218 Date of Disbursement 10 / 05 / 2006
	Mailing Address 6 Depot Street	Amount of Each Disbursement this Period 6905.13
	City Westford State MA Zip Code 01886-	
	Purpose of Disbursement Webhosting	WEBHOSTING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 61026.E9260 Date of Disbursement 10 / 16 / 2006
	Mailing Address PO Box 371461	Amount of Each Disbursement this Period 113.34
	City Pittsburgh State PA Zip Code 15250-	
	Purpose of Disbursement Express Mail	EXPRESS MAIL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	11018.47
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

<p>A. Full Name (Last, First, Middle Initial) Guardian Guardian</p> <p>Mailing Address Boston Group Office 1 Liberty Square</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9127 Date of Disbursement 10 / 01 / 2006</p> <p>Amount of Each Disbursement this Period 601.37</p> <p>INSURANCE</p>
<p>B. Full Name (Last, First, Middle Initial) Bruce Harrison</p> <p>Mailing Address 101 Elm St</p> <p>City Wakefield State MA Zip Code 01880-</p> <p>Purpose of Disbursement Reimbursement for food office meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61026.E9255 Date of Disbursement 10 / 12 / 2006</p> <p>Amount of Each Disbursement this Period 70.13</p> <p>REIMBURSEMENT FOR FOOD OFFICE MEETING</p>
<p>C. Full Name (Last, First, Middle Initial) Intranets.Com Intranets.Com</p> <p>Mailing Address PO Box 414725</p> <p>City Boston State MA Zip Code 02241-4725</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9205 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 1279.46</p> <p>COMPUTER SERVICES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1950.96

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) Lyndsay Jones	Transaction ID: 61016.E9215 Date of Disbursement 10 / 05 / 2006
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 52.50
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement Reimbursement for parking travel food	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) ▼
		REIMBURSEMENT FOR PARKING TRAVEL FOOD

B.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 61026.E9254 Date of Disbursement 10 / 12 / 2006
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 30.00
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement Reimbursement for parking	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) ▼
		REIMBURSEMENT FOR PARKING

C.	Full Name (Last, First, Middle Initial) Samantha Levine	Transaction ID: 61016.E9207 Date of Disbursement 10 / 05 / 2006
	Mailing Address 15 Oak St.	Amount of Each Disbursement this Period 135.03
	City Chestnut Hill State MA Zip Code 02467-	
	Purpose of Disbursement Reimbursement for parking travel food	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) ▼
		REIMBURSEMENT FOR PARKING TRAVEL FOOD

SUBTOTAL of Disbursements This Page (optional)	▶	217.53
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) Melissa Lucas Mailing Address 22 Slayton Road City Melrose State MA Zip Code 02176- Purpose of Disbursement Fundraising and administrative consulting; 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: 61016.E9204 Date of Disbursement 10 / 05 / 2006 Amount of Each Disbursement this Period 5500.00 FUNDRAISING AND ADMINISTRATIVE CONSULTING; NON-FEA
B.	Full Name (Last, First, Middle Initial) Communication, Inc. Majority Mailing Address 274 Marconi Blvd. Suite 260 City Columbus State OH Zip Code 43215- Purpose of Disbursement General Mailing non fea no federal candidate 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: 61026.E9261 Date of Disbursement 10 / 16 / 2006 Amount of Each Disbursement this Period 20000.00 GENERAL MAILING NON FEA NO FEDERAL CANDIDATE
C.	Full Name (Last, First, Middle Initial) NBM Northern Business Mailing Address 24 Terry Avenue City Burlington State MA Zip Code 01803- Purpose of Disbursement Copy machine 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: 61016.E9214 Date of Disbursement 10 / 05 / 2006 Amount of Each Disbursement this Period 438.75 COPY MACHINE

SUBTOTAL of Disbursements This Page (optional) ▶

25938.75

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) OBrien Inc.- OBrien Communicatio Mailing Address PO Box 659 City Wrentham State MA Zip Code 02093- Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 61016.E9213 Date of Disbursement 10 / 05 / 2006
	Amount of Each Disbursement this Period 107.50 TELEPHONE SERVICE

B. Full Name (Last, First, Middle Initial) Omni Parker House Mailing Address 60 School Street City Boston State MA Zip Code 02108- Purpose of Disbursement Event-Room charge for general party event Non FEA no federal candidate 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: 61016.E9211 Date of Disbursement 10 / 05 / 2006
	Amount of Each Disbursement this Period 226.80 EVENT-ROOM CHARGE FOR GENERAL PARTY EVENT NON FEA NO FEDERAL CANDIDATE

C. Full Name (Last, First, Middle Initial) Omni Parker House Mailing Address 60 School Street City Boston State MA Zip Code 02108- Purpose of Disbursement Event-Room charge for general party event Non FEA no federal candidate 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: 61016.E9212 Date of Disbursement 10 / 05 / 2006
	Amount of Each Disbursement this Period 3317.00 EVENT-ROOM CHARGE FOR GENERAL PARTY EVENT NON FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional) ▶	3651.30
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Ox-Eye Properties</p> <p>Mailing Address c/o Massey & Co. 85 Merrimac Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9210 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 12000.00</p> <p>RENT</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex/InterPay</p> <p>Mailing Address PO Box 8295</p> <p>City Boston State MA Zip Code 02266-</p> <p>Purpose of Disbursement Payroll-401 K</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9140 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 714.64</p> <p>PAYROLL-401 K</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex/InterPay</p> <p>Mailing Address PO Box 8295</p> <p>City Boston State MA Zip Code 02266-</p> <p>Purpose of Disbursement Payroll-Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9139 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 8393.90</p> <p>PAYROLL-TAXES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

21108.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 61016.E9141 Date of Disbursement 10 / 10 / 2006
	Mailing Address PO Box 8295	
	City Boston State MA Zip Code 02266-	Amount of Each Disbursement this Period 166.22
	Purpose of Disbursement Payroll Services	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 SERVICES

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 61016.E9201 Date of Disbursement 10 / 13 / 2006
	Mailing Address PO Box 8295	
	City Boston State MA Zip Code 02266-	Amount of Each Disbursement this Period 185.00
	Purpose of Disbursement Payroll Service - 401 K	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL SERVICE - 401 K

C.	Full Name (Last, First, Middle Initial) P Inc. Production Inc.	Transaction ID: 61026.E9262 Date of Disbursement 10 / 16 / 2006
	Mailing Address 137 Glenn St.	
	City Lawrence State MA Zip Code 01843-	Amount of Each Disbursement this Period 17211.10
	Purpose of Disbursement Event Audio fees non fea no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT AUDIO FEES NON FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional) ▶

17562.32

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) Jinara Reyes	Transaction ID: 61016.E9216 Date of Disbursement 10 / 05 / 2006
	Mailing Address 66 Greenleaf St. Apt. # 33	Amount of Each Disbursement this Period 174.00
	City Quincy State MA Zip Code 02169-	
	Purpose of Disbursement Reimbursement for travel	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) ▼
		REIMBURSEMENT FOR TRAVEL

B.	Full Name (Last, First, Middle Initial) Steven Roche	Transaction ID: 61016.E9229 Date of Disbursement 10 / 05 / 2006
	Mailing Address 4 Leblanc Dr	Amount of Each Disbursement this Period 670.74
	City Danvers State MA Zip Code 01923-	
	Purpose of Disbursement Reimbursement: See Below	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) ▼
		REIMBURSEMENT: SEE BELOW

C.	Full Name (Last, First, Middle Initial) Laz Parking Ltd.	Transaction ID: 61016.E9231 Date of Disbursement 10 / 05 / 2006
	Mailing Address 101 Merrimac Street	Amount of Each Disbursement this Period 375.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement S.Roches reimbursement for parking	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) ▼
		[MEMO ITEM] MEMO: S.ROCHES REIMBURSEM- ENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)	844.74
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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) Sprint/Nextel	Transaction ID: 61016.E9230 Date of Disbursement 10 / 05 / 2006
	Mailing Address PO Box 17990	Amount of Each Disbursement this Period 149.58
	City Denver State CO Zip Code 80217-	
	Purpose of Disbursement S.Roches reimbursement for phone calls	[MEMO ITEM] MEMO: S.ROCHES REIMBURSEMENT FOR PHONE CALLS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Priscilla Ruzzo	Transaction ID: 61016.E9209 Date of Disbursement 10 / 05 / 2006
	Mailing Address 85 Overlook Road	Amount of Each Disbursement this Period 198.00
	City Boston State MA Zip Code 02132-	
	Purpose of Disbursement Reimbursement for Travel	REIMBURSEMENT FOR TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Janice Saragoni Bradlee	Transaction ID: 61016.E9206 Date of Disbursement 10 / 05 / 2006
	Mailing Address 7 Mercer Circle	Amount of Each Disbursement this Period 3500.00
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement Political Consulting non fea no federal candidate	POLITICAL CONSULTING NON FEA NO FEDERAL CANDIDATE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3698.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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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) Ensieh Sarrami	Transaction ID: 61026.E9273 Date of Disbursement 10 / 12 / 2006
	Mailing Address 9214 Inglewood Dr.	Amount of Each Disbursement this Period 397.99
	City Potomac State MD Zip Code 20854-	
	Purpose of Disbursement Reimbursement: See Below	REIMBURSEMENT: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Ensieh Sarrami	Transaction ID: 61026.E9274 Date of Disbursement 10 / 12 / 2006
	Mailing Address 9214 Inglewood Dr.	Amount of Each Disbursement this Period 290.40
	City Potomac State MD Zip Code 20854-	
	Purpose of Disbursement E.Sarramis reimbursement for personal car usage	[MEMO ITEM] MEMO: E.SARRAMIS REIMBURSEMENT FOR PERSONAL CAR USAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile	Transaction ID: 61026.E9264 Date of Disbursement 10 / 16 / 2006
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 807.13
	City Saint Louis State MO Zip Code 63179-	
	Purpose of Disbursement Phone Services	PHONE SERVICES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1205.12
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) Matthew Talancy	Transaction ID: 61016.E9227
	Mailing Address 445 Malden St.	Date of Disbursement 10 / 05 / 2006
	City Holden State MA Zip Code 01520-	Amount of Each Disbursement this Period 359.05
	Purpose of Disbursement Reimbursement : See Below	REIMBURSEMENT : SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Matthew Talancy	Transaction ID: 61016.E9228
	Mailing Address 445 Malden St.	Date of Disbursement 10 / 05 / 2006
	City Holden State MA Zip Code 01520-	Amount of Each Disbursement this Period 345.60
	Purpose of Disbursement M.Talancys Reimbursement for Personal car usage	[MEMO ITEM] MEMO: M.TALANCYS REIMBURSEMENT FOR PERSONAL CAR USAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Matthew Talancy	Transaction ID: 61026.E9278
	Mailing Address 445 Malden St.	Date of Disbursement 10 / 12 / 2006
	City Holden State MA Zip Code 01520-	Amount of Each Disbursement this Period 329.50
	Purpose of Disbursement Reimbursement: See Below	REIMBURSEMENT: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	688.55
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) Matthew Talancy Mailing Address 445 Malden St. City Holden State MA Zip Code 01520-	Transaction ID: 61026.E9279 Date of Disbursement 10 / 12 / 2006
	Amount of Each Disbursement this Period 318.40
Purpose of Disbursement M.Talancys reimbursement for personal car usage 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) ▼

[MEMO ITEM]
MEMO: M.TALANCYS REIMBURSEMENT FOR PERSONAL CAR USAGE

B. Full Name (Last, First, Middle Initial) Matthew Talancy Mailing Address 445 Malden St. City Holden State MA Zip Code 01520-	Transaction ID: 61205.E9331 Date of Disbursement 10 / 17 / 2006
	Amount of Each Disbursement this Period 359.30
Purpose of Disbursement Reimbursement: See Below 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) ▼

REIMBURSEMENT: SEE BELOW

C. Full Name (Last, First, Middle Initial) Matthew Talancy Mailing Address 445 Malden St. City Holden State MA Zip Code 01520-	Transaction ID: 61026.E9270 Date of Disbursement 10 / 17 / 2006
	Amount of Each Disbursement this Period 314.00
Purpose of Disbursement M.Talancy Reimbursement for Personal car use 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) ▼

[MEMO ITEM]
MEMO: M.TALANCY REIMBURSEMENT FOR PERSONAL CAR USE

SUBTOTAL of Disbursements This Page (optional) ▶	359.30
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) USground USground	Transaction ID: 61026.E9265 Date of Disbursement 10 / 16 / 2006
	Mailing Address PO Box 130349	
	City Boston State MA Zip Code 02113-	Amount of Each Disbursement this Period 197.33
	Purpose of Disbursement Courier Candidate Name	COURIER
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 61026.E9266 Date of Disbursement 10 / 16 / 2006
	Mailing Address P.O. Box 1	
	City Worcester State MA Zip Code 01654-	Amount of Each Disbursement this Period 442.58
	Purpose of Disbursement Phone Candidate Name	PHONE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon Internet Services	Transaction ID: 61026.E9267 Date of Disbursement 10 / 16 / 2006
	Mailing Address PO Box 101096	
	City Atlanta State GA Zip Code 30392-	Amount of Each Disbursement this Period 767.62
	Purpose of Disbursement Internet Service Candidate Name	INTERNET SERVICE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	1407.53
TOTAL This Period (last page this line number only)	98361.18

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mass Republican State Committee</p> <p>Mailing Address 85 Merrimac Street Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement J.Oliveri transfer excess contrib from fed to non fed</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9153</p> <p>Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mass Republican State Committee</p> <p>Mailing Address 85 Merrimac Street Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement A. Merk transfer of excess contrib from fed to non fed</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9151</p> <p>Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mass Republican State Committee</p> <p>Mailing Address 85 Merrimac Street Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement R.Valentine transfer excess contrib from non fed to fed account</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9232</p> <p>Date of Disbursement 10 / 12 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
B.Andersontransfer excess contrib from fed to nonfed

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61016.E9156

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

19000.00

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

A.	Full Name (Last, First, Middle Initial) Brandon Barber <hr/> Mailing Address 106 Kendall Pond Rd. <hr/> City Windham State NH Zip Code 03087- <hr/> Purpose of Disbursement Payroll 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: 61016.E9128 Date of Disbursement 10 / 05 / 2006	Amount of Each Disbursement this Period 1022.44 PAYROLL
B.	Full Name (Last, First, Middle Initial) Brian Dodge <hr/> Mailing Address 10 Parker Road <hr/> City Groveland State MA Zip Code 01834- <hr/> Purpose of Disbursement Payroll 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: 61016.E9129 Date of Disbursement 10 / 05 / 2006	Amount of Each Disbursement this Period 2020.75 PAYROLL
C.	Full Name (Last, First, Middle Initial) Bruce Harrison <hr/> Mailing Address 101 Elm St <hr/> City Wakefield State MA Zip Code 01880- <hr/> Purpose of Disbursement Payroll - Administrative Support Service 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: 61026.E9253 Date of Disbursement 10 / 12 / 2006	Amount of Each Disbursement this Period 1000.00 PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

SUBTOTAL of Disbursements This Page (optional)	4043.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9130 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 969.61</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Samantha Levine</p> <p>Mailing Address 15 Oak St.</p> <p>City Chestnut Hill State MA Zip Code 02467-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61019.E9241 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 891.73</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Reid Morrison</p> <p>Mailing Address 180 Beacon St. Unit 18C</p> <p>City Boston State MA Zip Code 02116-</p> <p>Purpose of Disbursement Payroll - Administrative Support Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9208 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>PAYROLL - ADMINISTRATIVE SUPPORT SERVICE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2261.34

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Jinara Reyes</p> <p>Mailing Address 66 Greenleaf St. Apt. # 33</p> <p>City Quincy State MA Zip Code 02169-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9131 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 1319.26</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Ruth Rice</p> <p>Mailing Address 30 Fernview Apt 1</p> <p>City North Andover State MA Zip Code 01845-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9132 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 912.81</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Steven Roche</p> <p>Mailing Address 4 Leblanc Dr</p> <p>City Danvers State MA Zip Code 01923-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 61016.E9133 Date of Disbursement 10 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 2856.66</p> <p>PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)	5088.73
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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) Mark Rowe	Transaction ID: 61016.E9134 Date of Disbursement 10 / 05 / 2006
	Mailing Address 216 W. Plain St.	
	City Wayland State MA Zip Code 01778-	Amount of Each Disbursement this Period 1479.43
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Priscilla Ruzzo	Transaction ID: 61016.E9135 Date of Disbursement 10 / 05 / 2006
	Mailing Address 85 Overlook Road	
	City Boston State MA Zip Code 02132-	Amount of Each Disbursement this Period 2117.98
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Ensieh Sarrami	Transaction ID: 61016.E9136 Date of Disbursement 10 / 05 / 2006
	Mailing Address 9214 Inglewood Dr.	
	City Potomac State MD Zip Code 20854-	Amount of Each Disbursement this Period 967.03
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4564.44
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 60 / 62

<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) Matthew Talancy	Transaction ID: 61016.E9137 Date of Disbursement 10 / 05 / 2006
	Mailing Address 445 Malden St.	
	City Holden State MA Zip Code 01520-	Amount of Each Disbursement this Period 1105.65
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Robert Willington	Transaction ID: 61016.E9138 Date of Disbursement 10 / 05 / 2006
	Mailing Address 12 Arlington Street	
	City Reading State MA Zip Code 01867-	Amount of Each Disbursement this Period 1227.36
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2333.01
TOTAL This Period (last page this line number only)	18290.71

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 61 / 62
	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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90508.E11232	
Amount Incurred This Period 2091.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 2091.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Original debt for direct mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90508.E11230	
Amount Incurred This Period 79.82	Payment This Period 0.00	Outstanding Balance at Close of This Period 79.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Debt for Direct Mail - party related non FEA
Mailing Address Steve Meyers 1283 Main Street	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90508.E11228	
Amount Incurred This Period 3277.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3277.00

1) SUBTOTALS This Period This Page (optional).....	5448.54
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 1250.00	Transaction ID: LS90513.E11267	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Communication, Inc. Majority	Nature of Debt (Purpose): Original Debt for FEA Get Out the Vote Mailing
Mailing Address 274 Marconi Blvd. Suite 260	
City Columbus State OH ZIP Code 43215-	

Outstanding Balance Beginning This Period 23000.00	Transaction ID: LS90508.E11226	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23000.00

1) SUBTOTALS This Period This Page (optional).....	24250.00
2) TOTALS This Period (last page this line number only).....	29698.54
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	29698.54