

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTY

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="92338.05"/>	<input type="text" value="92338.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="57973.09"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="248938.39"/>	<input type="text" value="366333.70"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="306911.48"/>	<input type="text" value="458671.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="52537.54"/>	<input type="text" value="204297.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="254373.94"/>	<input type="text" value="254373.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTY

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17575.00	38575.00
(ii) Unitemized	18236.00	26672.95
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35811.00	65247.95
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	13000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	40811.00	78247.95
12. Transfers From Affiliated/Other Party Committees.....	206097.83	282694.26
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).....	2029.56	5391.49
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	248938.39	366333.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	248938.39	366333.70

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	28745.97	136879.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28745.97	136879.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	23791.57	67418.79
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	23791.57	67418.79
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	52537.54	204297.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52537.54	204297.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	40811.00	78247.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40811.00	78247.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	28745.97	136879.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2029.56	5391.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	26716.41	131487.53

**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 6 OF 41
<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

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 PARTY

A. MARIANN APPLEY
Full Name (Last, First, Middle Initial)

Mailing Address 2 COMMONWEALTH AVE
APT. 15A

City BOSTON State MA Zip Code 02116

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

Name of Employer SELF-EMPLOYED Occupation ARTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
03 / 17 / 2015
Transaction ID : SA11AI.20888

Amount of Each Receipt this Period
600.00

B. MRS. ANN R. BLACKHAM
Full Name (Last, First, Middle Initial)

Mailing Address 7 WAINWRIGHT ROAD
UNIT 21

City WINCHESTER State MA Zip Code 01890

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 17 / 2015
Transaction ID : SA11AI.21123

Amount of Each Receipt this Period
2500.00

C. LING CHAI
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation PRESIDENT & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11AI.21312

Amount of Each Receipt this Period
2500.00

REATTRIBUTION OF 01/13 CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 3100.00

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 7 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. JOHN B. CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 24 WESTWOOD RD

City NORTH FALMOUTH State MA Zip Code 02556

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11AI.20645

Amount of Each Receipt this Period
 250.00

B. MR. ROBERT FINNERAN
Full Name (Last, First, Middle Initial)

Mailing Address 1 CHERRY LANE

City GEORGETOWN State MA Zip Code 01833

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

Name of Employer SELF Occupation LEGAL SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : SA11AI.20831

Amount of Each Receipt this Period
 300.00

C. ALBION FLETCHER
Full Name (Last, First, Middle Initial)

Mailing Address 135 WEST ST

City BRAINTREE State MA Zip Code 02184

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

Name of Employer GENERAL ELECTRIC CO. Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : SA11AI.20837

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 8 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. MR. LAWRENCE FRANKO		Date of Receipt 03 / 26 / 2015 Transaction ID : SA11AI.20792
Mailing Address 359 SILVER HILL RD		Amount of Each Receipt this Period 225.00
City CONCORD	State MA	Zip Code 01742
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 225.00
Name of Employer DELAWARE INVESTMENTS	Occupation INVESTMENT EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS. JANET E. GARON		Date of Receipt 03 / 17 / 2015 Transaction ID : SA11AI.20975
Mailing Address PO BOX 24		Amount of Each Receipt this Period 250.00
City SOUTHBRIDGE	State MA	Zip Code 01550
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MERLE R. GREEN		Date of Receipt 03 / 13 / 2015 Transaction ID : SA11AI.21057
Mailing Address 4 MOUNT LEBANON ST		Amount of Each Receipt this Period 250.00
City PEPPERELL	State MA	Zip Code 01463
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	725.00
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 OF 41
<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 PARTY

A. MR. DANIEL KENARY
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 CHATHAM CIR
 City WELLESLEY State MA Zip Code 02481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11AI.20725
 Amount of Each Receipt this Period
 250.00

B. MR. KURT LANZA
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2178
 City LITTLETON State MA Zip Code 01460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11AI.20815
 Amount of Each Receipt this Period
 250.00

C. MR. ROBERT A. LAWRENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 LONGWOOD DR SUITE 124
 City WESTWOOD State MA Zip Code 02090
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : SA11AI.21142
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	11c
		<input type="checkbox"/>	12
		<input type="checkbox"/>	15
		<input type="checkbox"/>	16
		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. ROBERT ALLEN MAGINN
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
MM / DD / YYYY
01 / 13 / 2015
Transaction ID : SA11AI.21311

Amount of Each Receipt this Period
2500.00

SEE REATTRIBUTION BELOW

[MEMO ITEM]

B. ROBERT ALLEN MAGINN
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2015
Transaction ID : SA11AI.21322

Amount of Each Receipt this Period
-2500.00

SEE REATTRIBUTION ON PAGE 6 (SA11AI.21312)

[MEMO ITEM]

C. ROBERT ALLEN MAGINN
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2015
Transaction ID : SA11AI.21326

Amount of Each Receipt this Period
5000.00

SEE REATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 11 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. ROBERT ALLEN MAGINN
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11AI.21326.0

Amount of Each Receipt this Period
-5000.00

SEE REATTRIBUTION BELOW

[MEMO ITEM]

B. LING CHAI
Full Name (Last, First, Middle Initial)

Mailing Address 101 HUNTINGTON AVENUE
SUITE 2200

City BOSTON State MA Zip Code 02199

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

Name of Employer JENZABAR, INC. Occupation PRESIDENT & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11AI.21326.1

Amount of Each Receipt this Period
5000.00

REATTRIBUTED

[MEMO ITEM]

C. HARRIET L. NEEDHAM
Full Name (Last, First, Middle Initial)

Mailing Address 10 LANDFALL

City FALMOUTH State MA Zip Code 02540

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 23 / 2015
Transaction ID : SA11AI.20910

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 41
(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 PARTY

A. MR. ANASTASIOS PARAFESTAS
Full Name (Last, First, Middle Initial)
Mailing Address 29 WESTWOOD DRIVE
City WORCESTER State MA Zip Code 01609
FEC ID number of contributing federal political committee. **C**
Name of Employer THE BOLLARD GROUP LLC Occupation MANAGING MEMBER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 19 / 2015
Transaction ID : SA11AI.20781
Amount of Each Receipt this Period 3000.00

B. DANIEL J. SALMON
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 940
City NORTHBRIDGE State MA Zip Code 01534
FEC ID number of contributing federal political committee. **C**
Name of Employer LAW OFFICE OF DANIEL SANBORN Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 03 / 23 / 2015
Transaction ID : SA11AI.21047
Amount of Each Receipt this Period 4000.00

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	17575.00

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

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

FOR LINE NUMBER: PAGE 13 OF 41
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
PFIZER INC. PAC

Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.20692

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. WILLIAM ACHTMEYER
Full Name (Last, First, Middle Initial)

Mailing Address 50 ROWES WHARF

City BOSTON State MA Zip Code 02110

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

Name of Employer THE PARTHENON GROUP Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 04 / 2015
Transaction ID : SA12.21249

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

B. THOMAS BERK
Full Name (Last, First, Middle Initial)

Mailing Address 34 MAYFLOWER LANE

City DUXBURY State MA Zip Code 02332

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

Name of Employer BROWN BROTHERS HARRIMAN & CO. Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt 11 / 03 / 2014
Transaction ID : SA12.21262

Amount of Each Receipt this Period -5000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE; 2014 OVERLIMIT REFUND

[MEMO ITEM]

C. DAVID J. BREAZZANO
Full Name (Last, First, Middle Initial)

Mailing Address 193 DUTTON ROAD

City SUDBURY State MA Zip Code 01776

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

Name of Employer DDJ CAPITAL MANAGEMENT Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA12.21256

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 15 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. MR. WAYNE CAPOLUPO
Full Name (Last, First, Middle Initial)
Mailing Address 170 BEACH RD

City SALISBURY	State MA	Zip Code 01952
-------------------	-------------	-------------------

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

Name of Employer SPS NEW ENGLAND INC.	Occupation CHAIRMAN AND CEO
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : SA12.21263

Amount of Each Receipt this Period

-10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE; 2014 OVERLIMIT REFUND

[MEMO ITEM]

B. CHRISTOPHER W. COLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 72 HARBOR ST.

City MANCHESTER	State MA	Zip Code 01944
--------------------	-------------	-------------------

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

Name of Employer FIRST ATLANTIC CAPITAL, LLC	Occupation REAL ESTATE INVESTMENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA12.21251

Amount of Each Receipt this Period

2500.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

C. MR. THOMAS J. DESIMONE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 406

City SWAMPSCOTT	State MA	Zip Code 01907
--------------------	-------------	-------------------

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

Name of Employer WS DEVELOPMENT ASSOCIATION	Occupation REAL ESTATE DEVELOPER
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA12.21252

Amount of Each Receipt this Period

1000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 16 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. GEORGE P. DHIONIS
Full Name (Last, First, Middle Initial)

Mailing Address 3 FLINT STREET

City MARBLEHEAD State MA Zip Code 01945

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

Name of Employer ESPED Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA12.21253

Amount of Each Receipt this Period
 5000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

B. STEVEN DODGE
Full Name (Last, First, Middle Initial)

Mailing Address 110 KAULA LANE

City BONITA SPRINGS State FL Zip Code 34134

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

Name of Employer WINDOVER DEVELOPMENT LLC Occupation REAL ESTATE/CONSTRUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA12.21258

Amount of Each Receipt this Period
 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

C. EDMOND J. ENGLISH
Full Name (Last, First, Middle Initial)

Mailing Address 150 BEACON STREET

City BOSTON State MA Zip Code 02116

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

Name of Employer BOB'S DISCOUNT FURNITURE Occupation RETAIL EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA12.21242

Amount of Each Receipt this Period
 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 17 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. JOHN F. FISH
Full Name (Last, First, Middle Initial)

Mailing Address 776 BOYLSTON STREET

City BOSTON State MA Zip Code 02119

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

Name of Employer SUFFOLK CONSTRUCTION CO. Occupation CHAIRMAN & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA12.21257

Amount of Each Receipt this Period 2500.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

B. WILLIAM K. HOSKINS
Full Name (Last, First, Middle Initial)

Mailing Address 27 HARVEST CIRCLE

City LINCOLN State MA Zip Code 01775

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

Name of Employer HOSKINS & ASSOCIATES Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.21245

Amount of Each Receipt this Period 5000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

C. TOM KERSHAW
Full Name (Last, First, Middle Initial)

Mailing Address 84 BEACON STREET

City BOSTON State MA Zip Code 02108

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

Name of Employer HAMPSHIRE HOUSE CORPORATION Occupation BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 02 / 2015
Transaction ID : SA12.21247

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 18 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

Full Name (Last, First, Middle Initial)
A. MASSACHUSETTS VICTORY COMMITTEE

Mailing Address 310 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
162694.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2015

Transaction ID : SA12.20913

Amount of Each Receipt this Period
86097.83

JFC TRANSFER: SEE MEMO ENTRIES

Full Name (Last, First, Middle Initial)
B. A. PETER MONACO

Mailing Address 311 MARLBOROUGH STREET

City	State	Zip Code
BOSTON	MA	02116

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

Name of Employer	Occupation
RAPTOR GROUP	MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA12.21248

Amount of Each Receipt this Period
10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. JAMES F. MOONEY

Mailing Address 171 EDMUNDS ROAD

City	State	Zip Code
WELLESLEY	MA	02481

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

Name of Employer	Occupation
THE BAUPOST GROUP	INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA12.21259

Amount of Each Receipt this Period
5000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	86097.83
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 19 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. FREDERICK MUZI
Full Name (Last, First, Middle Initial)

Mailing Address 10 POWISSET STREET

City DOVER State MA Zip Code 02030

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.21243

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

B. DANIEL J. QUIRK
Full Name (Last, First, Middle Initial)

Mailing Address 50 BEACON STREET

City CHESTNUT HILL State MA Zip Code 02467

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

Name of Employer QUIRK AUTO Occupation AUTO DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA12.21241

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

C. REPUBLICAN NATIONAL COMMITTEE
Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 120000.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.20653

Amount of Each Receipt this Period 120000.00

SUBTOTAL of Receipts This Page (optional).....▶	120000.00
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 20 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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 PARTY

A. MARK SHAUGHNESSY
Full Name (Last, First, Middle Initial)

Mailing Address 76 HAWKTREE DR

City WESTWOOD State MA Zip Code 02090

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

Name of Employer BOYLE, SHAUGHNESSY & CAMPO, PC Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.21255

Amount of Each Receipt this Period 10000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

B. WILLIAM C VAN FAASEN
Full Name (Last, First, Middle Initial)

Mailing Address 12 PROCTOR STREET

City MANCHESTER State MA Zip Code 01944

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 ▼ 5000.00

Date of Receipt 03 / 19 / 2015
Transaction ID : SA12.21261

Amount of Each Receipt this Period 5000.00

JFC TRANSFER: MASSACHUSETTS VICTORY COMMITTEE

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	206097.83

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 21 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. MARATHON MOVING COMPANY
Full Name (Last, First, Middle Initial)
Mailing Address 129 YORK AVENUE

City RANDOLPH	State MA	Zip Code 02368
------------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2015

Transaction ID : SA15.20926

Amount of Each Receipt this Period
1690.00

VENDOR REFUND: OVERPAYMENT

B. WIGHT FAMILY TRUST
Full Name (Last, First, Middle Initial)
Mailing Address 11 CLEMENTS LANE

City SOUTH HAMPTON	State NH	Zip Code 03827
-----------------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2015

Transaction ID : SA15.20680

Amount of Each Receipt this Period
339.56

VENDOR REFUND: OVERPAYMENT

C.
Full Name (Last, First, Middle Initial)
Mailing Address _____

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2029.56
TOTAL This Period (last page this line number only).....▶	2029.56

**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 PARTY

Full Name (Last, First, Middle Initial)

A. 1505 COMMONWEALTH AVE BUSINESS CENTER LLC

Mailing Address 20 LINDEN ST, SUITE 202

City ALSTON State MA Zip Code 02134

Purpose of Disbursement
VOIDED CHECK: RENT (ISSUED 12/15/2014)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.20628

Amount of Each Disbursement this Period

-3500.00

Full Name (Last, First, Middle Initial)

B. 420 BOSTON TURNPIKE LLC

Mailing Address 420 BOSTON TURNPIKE

City SHREWSBURY State MA Zip Code 01545

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SB21B.20553

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

C. AIM MUTUAL INSURANCE CO.

Mailing Address P.O. BOX 4070

City BURLINGTON State MA Zip Code 01803

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : SB21B.20554

Amount of Each Disbursement this Period

1308.00

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

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

-992.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. APEX

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SB21B.20556

Amount of Each Disbursement this Period

200.80

Full Name (Last, First, Middle Initial)

B. BYTEBULB, INC.

Mailing Address PO BOX 51896

City BOSTON State MA Zip Code 02205

Purpose of Disbursement
TECHNOLOGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : SB21B.20561

Amount of Each Disbursement this Period

431.50

Full Name (Last, First, Middle Initial)

C. CHARLESTOWN SELF STORAGE

Mailing Address 50 TERMINAL ST
BLDG 1

City CHARLESTOWN State MA Zip Code 02129

Purpose of Disbursement
STORAGE UNIT PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SB21B.20563

Amount of Each Disbursement this Period

165.36

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

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

797.66

**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 PARTY

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
EMAIL MARKETING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : SB21B.20564

Amount of Each Disbursement this Period

73.00

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address PO BOX 1577

City NEWARK State NJ Zip Code 07101-1577

Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2015

Transaction ID : SB21B.20565

Amount of Each Disbursement this Period

274.55

Full Name (Last, First, Middle Initial)

C. COMCAST

Mailing Address PO BOX 1577

City NEWARK State NJ Zip Code 07101-1577

Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : SB21B.20566

Amount of Each Disbursement this Period

270.47

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

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

618.02

**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 PARTY

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address PO BOX 1577

City NEWARK State NJ Zip Code 07101-1577

Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	5

Transaction ID : SB21B.20567

Amount of Each Disbursement this Period

2	8	6	.	2	7
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address PO BOX 1577

City NEWARK State NJ Zip Code 07101-1577

Purpose of Disbursement
VOIDED CHECK: BROADBAND SERVICES (ISSUED 9/26/14)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		9	2		2	0	1	5

Transaction ID : SB21B.20633

Amount of Each Disbursement this Period

-	2	9	3	.	2	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address P.O. BOX 371461

City PITTSBURG State PA Zip Code 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	5

Transaction ID : SB21B.20572

Amount of Each Disbursement this Period

4	1	.	5	3
---	---	---	---	---

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

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

3	4	.	5	9
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**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 PARTY

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURG PA 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SB21B.20573

Amount of Each Disbursement this Period

17.31

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURG PA 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2015

Transaction ID : SB21B.20574

Amount of Each Disbursement this Period

16.97

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURG PA 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SB21B.20575

Amount of Each Disbursement this Period

16.97

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

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

51.25

**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 PARTY

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURG PA 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.20576**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURG PA 15250

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.20577**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. GOVERNMENT CENTER GARAGE

Mailing Address 50 NEW SUDBURY STREET

City State Zip Code
BOSTON MA 02114

Purpose of Disbursement
PARKING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.20578**

Amount of Each Disbursement this Period

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

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 PARTY

Full Name (Last, First, Middle Initial)

A. GOVERNMENT CENTER GARAGE

Mailing Address 50 NEW SUDBURY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PARKING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2015

Transaction ID : SB21B.20579

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. GOVERNMENT CENTER GARAGE

Mailing Address 50 NEW SUDBURY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PARKING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SB21B.20580

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. KIRSTEN HUGHES

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SB21B.20552

Amount of Each Disbursement this Period

295.50

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

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

2445.50

**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 PARTY

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address PO BOX 1100

City ALBANY State NY Zip Code 12250

Purpose of Disbursement
HUGHES REIMBURSEMENT: MOBILE PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SB21B.20552.0

Amount of Each Disbursement this Period

250.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BOSTON BEER WORKS

Mailing Address 112 CANAL ST

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
HUGHES REIMBURSEMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SB21B.20552.1

Amount of Each Disbursement this Period

45.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. I360

Mailing Address PO BOX 37046

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement
ONLINE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.20583

Amount of Each Disbursement this Period

1000.00

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

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. KAUPPI COMMUNICATIONS

Mailing Address P.O. BOX 152

City WEST GROTON State MA Zip Code 01471

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2015

Transaction ID : **SB21B.20584**

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. LEXISNEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : **SB21B.20585**

Amount of Each Disbursement this Period

173.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 512 MEANS STREET
SUITE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
EMAIL ADVERTISING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2015

Transaction ID : **SB21B.20586**

Amount of Each Disbursement this Period

325.00

Category/
Type

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

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

1498.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 512 MEANS STREET
SUITE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
EMAIL ADVERTISING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SB21B.20587

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. MASSDOT

Mailing Address 10 PARK PLAZA
SUITE 4160

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
TRAVEL: TOLLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : SB21B.20588

Amount of Each Disbursement this Period

43.40

Full Name (Last, First, Middle Initial)

C. NATION BUILDER

Mailing Address 520 S. GRAND AVE

City LOS ANGELES State CA Zip Code 90071

Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SB21B.20592

Amount of Each Disbursement this Period

708.00

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

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

1076.40

**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 PARTY

Full Name (Last, First, Middle Initial)

A. OMNI SECURITY SYSTEMS INC

Mailing Address PO BOX 879

City BYFIELD State MA Zip Code 01922

Purpose of Disbursement
SECURITY SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SB21B.20594

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. OX-EYE PROPERTIES

Mailing Address 117 S. 14TH ST., #300

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SB21B.20595

Amount of Each Disbursement this Period

5555.21

Full Name (Last, First, Middle Initial)

C. POWDER HORN PRESS

Mailing Address 301 COURT ST # 1

City PLYMOUTH State MA Zip Code 02360

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.20597

Amount of Each Disbursement this Period

52.06

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

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

5907.27

**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 PARTY

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2015

Transaction ID : **SB21B.20598**

Amount of Each Disbursement this Period

5045.89

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : **SB21B.20599**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
DATABASE MANAGEMENT SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : **SB21B.20600**

Amount of Each Disbursement this Period

177.80

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

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

10223.69

**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 PARTY

Full Name (Last, First, Middle Initial)

A. PRISCILLA RUZZO

Mailing Address 85 OVERLOOK ROAD

City WEST ROXBURY State MA Zip Code 02132

Purpose of Disbursement
VOIDED CHECK: FUNDRAISING CONSULTING (ISSUED 7/18/13)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.20631

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. SELCO

Mailing Address PO BOX 9258

City CHELSEA State MA Zip Code 02150-9258

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.20601

Amount of Each Disbursement this Period

301.88

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 31 MILK STREET

City BOSTON State MA Zip Code 02109

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SB21B.20604

Amount of Each Disbursement this Period

539.00

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

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

-159.12

**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 PARTY

Full Name (Last, First, Middle Initial)

A. W.B. MASON

Mailing Address 59 CENTRE STREET

City BROCKTON State MA Zip Code 02301

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2015

Transaction ID : SB21B.20605

Amount of Each Disbursement this Period

133.71

Full Name (Last, First, Middle Initial)

B. W.B. MASON

Mailing Address 59 CENTRE STREET

City BROCKTON State MA Zip Code 02301

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SB21B.20606

Amount of Each Disbursement this Period

48.28

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

181.99

27973.45

**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 PARTY

Full Name (Last, First, Middle Initial)

A. CHARLYCE BOZZELLO

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2015

Transaction ID : SB30B.20609

Amount of Each Disbursement this Period

202.13

Full Name (Last, First, Middle Initial)

B. CHARLYCE BOZZELLO

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2015

Transaction ID : SB30B.20617

Amount of Each Disbursement this Period

202.13

Full Name (Last, First, Middle Initial)

C. ALISON FALK

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2015

Transaction ID : SB30B.20610

Amount of Each Disbursement this Period

1224.28

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

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

1628.54

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

Use separate schedule(s)
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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 PARTY

Full Name (Last, First, Middle Initial)

A. ALISON FALK

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.20618

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. KIRSTEN HUGHES

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.20611

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. KIRSTEN HUGHES

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.20619

Amount of Each Disbursement this Period

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

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 PARTY

Full Name (Last, First, Middle Initial)

A. SARAH HUNT

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SB30B.20612

Amount of Each Disbursement this Period

230.87

Full Name (Last, First, Middle Initial)

B. SARAH HUNT

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2015

Transaction ID : SB30B.20620

Amount of Each Disbursement this Period

230.87

Full Name (Last, First, Middle Initial)

C. EMMALEE G. KALMBACH

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SB30B.20613

Amount of Each Disbursement this Period

1398.37

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

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

1860.11

**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 PARTY

Full Name (Last, First, Middle Initial)

A. EMMALEE G. KALMBACH

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2015

Transaction ID : SB30B.20621

Amount of Each Disbursement this Period

1398.37

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER A. LANE

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SB30B.20614

Amount of Each Disbursement this Period

1457.68

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER A. LANE

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2015

Transaction ID : SB30B.20622

Amount of Each Disbursement this Period

1267.24

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

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

4123.29

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

Use separate schedule(s)
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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 PARTY

Full Name (Last, First, Middle Initial)

A. PAYRIGHT PAYROLL SERVICES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Mailing Address 468 GREAT ROAD

Transaction ID : SB30B.20615

City ACTON State MA Zip Code 01720

Amount of Each Disbursement this Period

3198.79

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. PAYRIGHT PAYROLL SERVICES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Mailing Address 468 GREAT ROAD

Transaction ID : SB30B.20616

City ACTON State MA Zip Code 01720

Amount of Each Disbursement this Period

187.95

Purpose of Disbursement
PAYROLL FEES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. PAYRIGHT PAYROLL SERVICES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2015

Mailing Address 468 GREAT ROAD

Transaction ID : SB30B.20624

City ACTON State MA Zip Code 01720

Amount of Each Disbursement this Period

4288.00

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

7674.74

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

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**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 PARTY

Full Name (Last, First, Middle Initial)

A. PAYRIGHT PAYROLL SERVICES, INC.

Mailing Address 468 GREAT ROAD

City ACTON State MA Zip Code 01720

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

Transaction ID : SB30B.20625

Amount of Each Disbursement this Period

64.25

Full Name (Last, First, Middle Initial)

B. BRIAN T. WYNNE

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

Transaction ID : SB30B.20623

Amount of Each Disbursement this Period

2070.42

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

2134.67

23791.57
