

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 OCT 25 A 10:21

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>RI Republican State Central Committee</b>		2. FEC IDENTIFICATION NUMBER <b>C-00078196</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>551 South Main Street</b>		
CITY, STATE and ZIP CODE <b>Providence, RI 02908</b>		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- 12-Day Pre-Election Report for the General  
(Type of Election)  
election on Nov 7<sup>th</sup> in the State of RI  
 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ in the State of \_\_\_\_\_

(h) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>Oct 1, 2000</u> through <u>Oct 18, 2000</u>			
B.	(a) Cash on Hand January 1, 19 <u>99</u>		\$ 516. <sup>57</sup>
	(b) Cash on Hand at Beginning of Reporting Period	\$ 48,907. <sup>66</sup>	
	(c) Total Receipts (from Line 10)	\$ 30,671. <sup>45</sup>	\$ 330,071. <sup>73</sup>
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 79,579. <sup>11</sup>	\$ 335,233. <sup>27</sup>
7.	Total Disbursements (from Line 20)	\$ 10,519. <sup>27</sup>	\$ 266,173. <sup>40</sup>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 69,059. <sup>84</sup>	\$ 69,059. <sup>87</sup>
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll free 800-424-6530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 32,125. <sup>84</sup>	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.			

Type or Print Name of Treasurer <b>MARGARET C COUGHLIN</b>	Date <b>10-5-00</b>
Signature of Treasurer <i>Margaret C Coughlin</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g

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FEC FORM 3X  
(revised 9/90)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: AC Republican State Central Committee

REPORT COVERING PERIOD  
FROM 10-1-00 TO: 10-18-00

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	19,500. <sup>00</sup>	62,450	11(a)(i)
ii. Unitemized	2,090. <sup>00</sup>	7,675	11(a)(ii)
iii. Total (add i and ii) >	21,590. <sup>00</sup>	70,125	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)		5000	11(c)
d. Total Contributions (add a, ii, b and c) >	21,590. <sup>00</sup>	80,125	11(d)
12. Transfers From Affiliated/Other Party Committees		186,600	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity	9,081. <sup>75</sup>	63,346. <sup>73</sup>	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	30,671. <sup>75</sup>	330,071. <sup>73</sup>	19
20. Total Federal Receipts (subtract line 18 from line 19) >	21,590. <sup>00</sup>	266,725. <sup>00</sup>	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	4014. <sup>65</sup>	48,444. <sup>01</sup>	21(a)(i)
ii. Non-Federal Share	6504. <sup>62</sup>	67,287. <sup>64</sup>	21(a)(ii)
b. Other Federal Operating Expenditures		149,941. <sup>95</sup>	21(b)
c. Total Operating Expenditures (add a, i, ii, and b) >	10,519. <sup>27</sup>	266,173. <sup>40</sup>	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	- 0 -	- 0 -	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,519. <sup>27</sup>	266,173. <sup>40</sup>	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	4,014. <sup>65</sup>	198,885. <sup>76</sup>	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	21,590. <sup>00</sup>	80,125. <sup>00</sup>	32
33. Total Contribution Refunds (from line 28d)	- 0 -	- 0 -	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	21,590. <sup>00</sup>	80,125. <sup>00</sup>	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	4014. <sup>65</sup>	198,885. <sup>76</sup>	35
36. Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -	36
37. Net Operating Expenditures (subtract line 36 from line 35) >	4014. <sup>65</sup>	198,885. <sup>76</sup>	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER

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 committees.

NAME OF COMMITTEE (in Full)

RI Republican State Central Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sophie Dantieth 524 Andrews Avenue Deer Beach, FL 33483	Retired Occupation: n/a	10/4/00	2500. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Albert Harkness 1965A Commodore Perry Highway Wakefield, RI 02879	Retired Occupation: n/a	10/6/00	1000. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Kean 2 Angell Street Providence, RI 02903	Retired Occupation: n/a	10/11/00	1000. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Lippitt 108 Prospect Street Providence, RI 02906	Retired Occupation: n/a	10/5/00	3000. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Anne Lippitt 108 Prospect Street Providence, RI 02906	Retired Occupation: n/a	10/5/00	2500. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Duncan Mauran 120 Congdon Street Providence, RI 02906	Prov. Steamboat Co. Occupation: CSU	10/10/00	2000. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louise Mauran 120 Congdon Street Providence, RI 02906	Retired Occupation: n/a	10/11/00	4000. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4000		

SUBTOTAL of Receipts This Page (optional)

16,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2  
FOR LINE NUMBER

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)

RE Republican State Central Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. James Michaud 10 Mt. Laurel Way N. Kingsford, NC 28552	(self employed) Dr. James Michaud Occupation: Chiropractor	10/19/00	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jonathan Pardee 226 Bellvue Ave Newport, N.C. 28546	Retired Occupation: n/a	10/6/00	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Siener 375 Narrow Lane Greene, NC 28527	Coley Group Occupation: Chairman	10/10/00	2000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Sage 12 Elm Lane Barringer, NC 28506	Retired Occupation: n/a	10/9/00	1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	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 > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	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 > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	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 > \$		

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

3500

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

19,500

**SCHEDULE D**

Revised 3/80

**DEBTS AND OBLIGATIONS**

Excluding Loans

Page 1 of 2 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Debtor (or Full Name of Creditor)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
RI Republican State Central Comm. A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor RI Republican Party - STATE ACCOUNT - 551 Smith Main Street Providence, RI 02903	8041. <sup>79</sup>	-0-	-0-	8041. <sup>79</sup>
Nature of Debt (Purpose): allocated expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Capital View Associates 400 Smith Street Providence, RI 02908	3500. <sup>00</sup>	-0-	-0-	3500. <sup>00</sup>
Nature of Debt (Purpose): Rent				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Halsay Properties 18 Burnside Street Bristol, RI 02809	1587. <sup>34</sup>	-0-	-0-	1587. <sup>34</sup>
Nature of Debt (Purpose): Rent + Utilities				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Norma Willis 1191 North Road Jameson, RI 02835	4000. <sup>00</sup>	-0-	-0-	4000. <sup>00</sup>
Nature of Debt (Purpose): back pay				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor James E. Murphy, Jr 117 Uphire Circle Gaithersburg, MD 20878	1778. <sup>86</sup>	-0-	-0-	1778. <sup>86</sup>
Nature of Debt (Purpose): travel expenses				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Pitney BOWES PO Box 5151 Norwalk, CT 06856	635. <sup>28</sup>	182. <sup>01</sup>	182. <sup>01</sup>	635. <sup>28</sup>
Nature of Debt (Purpose): Equipment				

1) SUBTOTALS This Period This Page (optional)

19,543.<sup>32</sup>

2) TOTALS This Period (last page in this line 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**

(Revised 3/80)

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

Page 2 of 2 for  
 LINE NUMBER 10  
 (Use separate schedules  
 for each numbered line)

Name of Committee (in Full)

RI Republican State Central Comm.

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor  
 Richard Kizarian  
 377 Jayram Street  
 Providence, RI 02908

600. <sup>00</sup>	-0-	-0-	600. <sup>00</sup>
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Nature of Debt (Purpose):  
 Photography

B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor  
 Ralph Starr Band  
 3 Regency Plaza  
 Providence, RI 02903

325. <sup>00</sup>	-0-	-0-	325. <sup>00</sup>
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Nature of Debt (Purpose):  
 Band

C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor  
 Direct Mail Services  
 1450 Automobile Blvd.  
 St. Petersburg, Florida

4007. <sup>52</sup>	-0-	-0-	4007. <sup>52</sup>
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Nature of Debt (Purpose):  
 direct mail

D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor  
 Joan Quick  
 165 Mollen Hill Road  
 Little Compton, RI 02832

7650. <sup>00</sup>	-0-	-0-	7650. <sup>00</sup>
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Nature of Debt (Purpose):  
 Back Pay

E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor

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Nature of Debt (Purpose):

F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor

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Nature of Debt (Purpose):

1) SUBTOTALS This Period This Page (optional)	12,582. <sup>52</sup>
2) TOTALS This Period (last page in this line only)	32,125. <sup>84</sup>
3) TOTAL OUTSTANDING LOANS from Schedule O (last page only)	-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	32,125. <sup>84</sup>

ALLOCATION RATIOS

NAME OF COMMITTEE

Rhode Island Republican State Central Committee

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
<p>Keeping Event</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	30	70
<p>BUSH Letter</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	10	90
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		

TRANSFERS FROM  
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE <i>RE Republican State Central Committee</i>	TOTAL AMOUNT TRANSFERRED
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NAME OF ACCOUNT <i>RE Republican Perry State Account</i>	DATE OF RECEIPT <i>10/12/80</i>	\$ <i>9081.45</i>
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive .....	<i>6716.92</i>		
ii) Direct Fundraising (List Events-Amount for Each)			
a) <i>Push Letter</i>		<i>435.39</i>	
b) <i>Reading Event</i>		<i>1979.14</i>	
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising .....			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support .....			

NAME OF ACCOUNT	DATE OF RECEIPT	\$
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive .....			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising .....			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support .....			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS
SUBTOTAL THIS PAGE .....	<i>6716.92</i>	<i>2364.53</i>	<i>9081.45</i>
TOTAL THIS PERIOD .....	<i>6716.92</i>	<i>2364.53</i>	<i>9081.45</i>



NAME OF COMMITTEE  
*RT Republican State Central Committee*

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Leons Watch &amp; Card Club 400 Narragansett Parkway Warwick, RI 02888</i>	<i>Printing</i>	<i>10/5/00</i>	<i>500.<sup>00</sup></i>	<i>215.<sup>00</sup></i>	<i>285.<sup>00</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>102,988.<sup>57</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Mancini Associates 15 Imperial Place Providence, RI 02907</i>	<i>Utilities</i>	<i>10/10/00</i>	<i>117.<sup>15</sup></i>	<i>50.<sup>37</sup></i>	<i>66.<sup>78</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>103,105.<sup>72</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Pitney Bowes PO Box 5151 Norwalk, CT 06856</i>	<i>Postage meter</i>	<i>10/10/00</i>	<i>182.<sup>01</sup></i>	<i>78.<sup>20</sup></i>	<i>103.<sup>75</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>103,287.<sup>73</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>MCI PO Box 856053 Louisville, KY 40295</i>	<i>Telephone</i>	<i>10/10/00</i>	<i>159.<sup>62</sup></i>	<i>68.<sup>64</sup></i>	<i>90.<sup>98</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>103,449.<sup>35</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>Paychex 501 Wamporony Trail E. Providence, RI 02914</i>	<i>payroll</i>	<i>10/2/00</i>	<i>1228.<sup>60</sup></i>	<i>528.<sup>30</sup></i>	<i>700.<sup>30</sup></i>
	<i>TAXES</i>	<i>10/7/00</i>	<i>224.<sup>47</sup></i>	<i>311.<sup>52</sup></i>	<i>412.<sup>95</sup></i>
		<i>10/2/00</i>	<i>224.<sup>47</sup></i>	<i>311.<sup>52</sup></i>	<i>412.<sup>95</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>106,124.<sup>89</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
<i>America On Line 22000 AOL WAY Dulles, VA 20166</i>	<i>usage fee</i>	<i>10/5/00</i>	<i>26.<sup>95</sup></i>	<i>11.<sup>59</sup></i>	<i>15.<sup>36</sup></i>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>106,151.<sup>84</sup></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE .....			<i>3663.<sup>27</sup></i>	<i>1575.<sup>20</sup></i>	<i>2088.<sup>07</sup></i>
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a.1 and non-Fed. share to 21 a.1) ....					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 21 of the detailed summary page) .....					

NAME OF COMMITTEE

RI Republican State Central Committee


A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Richard Scarpellino 56 Audubon Ave N. Providence, RI 02908	Net Pay	10/2/00	401. <sup>98</sup>	172. <sup>85</sup>	229. <sup>13</sup>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 106,553. <sup>82</sup> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Tim Bonin 42 Sandy Glen Drive Holden, MA 01520	Net PAY	10/2/00 10/15/00	1179. <sup>87</sup> 1179. <sup>87</sup>	507. <sup>34</sup> 507. <sup>34</sup>	672. <sup>53</sup> 672. <sup>53</sup>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 108,93. <sup>56</sup> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Timothy Costa 84 Enfield Avenue Providence, RI 02908	Net Pay	10/2/00	2174. <sup>22</sup>	934. <sup>91</sup>	1239. <sup>31</sup>
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 111,052. <sup>78</sup> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			14935. <sup>94</sup>	2122. <sup>44</sup>	2813. <sup>50</sup>
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

NAME OF COMMITTEE  
*AC Republican State Central Committee*

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Purchase Power PO Box 856042 Louisville, KY 40285</i>	<i>Postage; Meeting event</i>	<i>10/16/00</i>	<i>625.00</i>	<i>187.50</i>	<i>437.50</i>
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>3209.47</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>Olsen + Delisi 1609 Shoal Creek Austin, Texas 78701</i>	<i>Printing Buth Letter</i>	<i>10/10/00</i>	<i>1295.06</i>	<i>129.51</i>	<i>1165.55</i>
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i>1834.78</i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <i></i> <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE .....			<i>1920.06</i>	<i>317.01</i>	<i>1603.05</i>
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a f) .....			<i>10,519.21</i>	<i>4014.65</i>	<i>6504.62</i>
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) .....					

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 10/23/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	10/25/00 DATE PREPARED