

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Massachusetts Republican State Congressional Committee

ADDRESS (number and street) 85 Merrimac Street, Suite 400
 Check if different than previously reported. (ACC)
Boston MA 02114

2. **FEC IDENTIFICATION NUMBER** C00042622
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 03 01 2009 through 03 31 2009

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

Type or Print Name of Treasurer Brent Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 04 14 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		25389.18
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	53493.09									
(c) Total Receipts (from Line 19)	75127.32	207663.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	128620.41	233052.90								
7. Total Disbursements (from Line 31)	56172.06	165039.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	72448.35	68013.13								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	56358.33	167788.33
(i) Itemized (use Schedule A)	17597.00	37558.00
(ii) Unitemized	73955.33	205346.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	73955.33	205346.33
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1171.99	2317.39
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	75127.32	207663.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	75127.32	207663.72

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	51068.75	159936.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	51068.75	159936.46
22. Transfers to Affiliated/Other Party Committees.....	5000.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	103.31	103.31
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	56172.06	165039.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56172.06	165039.77

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	73955.33	205346.33
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	73955.33	205346.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	51068.75	159936.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	1171.99	2317.39
38. Net Operating Expenditures (subtract Line 37 from Line 36)	49896.76	157619.07

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 42
(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

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen Adams

Mailing Address 197 Eighth St. Unit PH215

City State Zip Code
Boston MA 02129

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

Name of Employer Occupation
Goodwin Procter Lawyer

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 90410.C173145

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
James Barker

Mailing Address 10 Naomi Drive

City State Zip Code
Gloucester MA 01930-1929

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

Name of Employer Occupation
Self Employed investor

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

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 90410.C173115

Amount of Each Receipt this Period
200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Fred Barrows

Mailing Address 370 Pratt St.

City State Zip Code
Mansfield MA 02048

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

Name of Employer Occupation
Barrows Insurance Ins. Sales

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

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 90317.C172866

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

1400.00

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 7 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kimberly Benjaminsen

Mailing Address 804 Thayer Street

City Abington State MA Zip Code 02351

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

Name of Employer Atlantic Trust Company Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2009
Transaction ID: 90317.C172876
Amount of Each Receipt this Period 250.00
Receipt

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

Mailing Address 280 Dudley St

City Brookline State MA Zip Code 02446

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

Name of Employer Health Dialog Inc. Occupation Chairman and CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 90317.C172864
Amount of Each Receipt this Period 10000.00
Receipt

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

Mailing Address 133 Weston Rd.

City Lincoln State MA Zip Code 01773

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 ▼ 1000.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 90320.C172980
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 11250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A.

Full Name (Last, First, Middle Initial)
Douglas Berthiaume

Mailing Address 18 Buttonwood Drive

City State Zip Code
Andover MA 01810

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Waters Inc CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 90410.C173106

Amount of Each Receipt this Period

2000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Stephen Binder

Mailing Address PO Box 286

City State Zip Code
Lincoln MA 01773

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fidelity Investments Investment Manager

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

Date of Receipt

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

Transaction ID: 90410.C173147

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Harvey Bines

Mailing Address 36 Clarke St

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Sullivan & Worcester Lawyer

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

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 90410.C173132

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

8000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 42
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Patrick Brennan

Mailing Address 225 Northern Ave, Apt. PH06

City State Zip Code
Boston MA 02210

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

Name of Employer Feeley & Driscoll Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 90410.C172982

Amount of Each Receipt this Period
250.00

Receipt

B.

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

Mailing Address 1 Tucks Point Road

City State Zip Code
Manchester MA 01944

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 90410.C173107

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Mark Cohen

Mailing Address 125 Chestnut Street

City State Zip Code
Concord MA 01742

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

Name of Employer Office Paper Recovery Sys. Inc Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 90317.C172850

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 42

(check only one)

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

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

A.

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

Mailing Address 101 Woodsley Road

City State Zip Code
Longmeadow MA 01106

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

Name of Employer Occupation
Ventry Industries CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
10000.00

Date of Receipt

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

Transaction ID: 90317.C172854

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Tanya DeGenova

Mailing Address 13 Taft St.

City State Zip Code
Marblehead MA 01945

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

Name of Employer Occupation
TSD Security Consulting Security Consultant

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

Date of Receipt

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

Transaction ID: 90410.C173032

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Viriato DeMacedo

Mailing Address 54 Mountain Hill Rd.

City State Zip Code
Plymouth MA 02360

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

Name of Employer Occupation
Commonwealth of Massachusetts State Representative

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

Date of Receipt

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

Transaction ID: 90410.C173026

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Pasquale Franchi

Mailing Address 182 West Central St.
Suite 303

City Natick State MA Zip Code 01760

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

Name of Employer Franchi Management Co, Inc.
Occupation Real Estate Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 90317.C172822
 Amount of Each Receipt this Period 150.00
 Receipt

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

Mailing Address 40 Dune Drive

City Chatham State MA Zip Code 02633-2519

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

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 90317.C172747
 Amount of Each Receipt this Period 100.00
 Receipt

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

Mailing Address 81 Marlborough St. #1

City Boston State MA Zip Code 02116

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

Name of Employer Jen Mark, LLC.
Occupation Merchant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 90410.C173069
 Amount of Each Receipt this Period 250.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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 12 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Stephen Jeffries		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 12 Brimmer St.		Transaction ID: 90317.C172870		
	City Boston	State MA	Zip Code 02108-1002	Amount of Each Receipt this Period 208.33	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer S.B. Jeffries Consultants	Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
208.33

B.	Full Name (Last, First, Middle Initial) Jeanne Kangas		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 959 Hill Rd		Transaction ID: 90317.C172865		
	City Boxborough	State MA	Zip Code 01719	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer Arnold & Kangas, P.C.	Occupation Lawyer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
2000.00

C.	Full Name (Last, First, Middle Initial) Amy Kelly		Date of Receipt MM / DD / YYYY 03 / 19 / 2009		
	Mailing Address 157 Rice Road		Transaction ID: 90410.C173266		
	City Quincy	State MA	Zip Code 02170	Amount of Each Receipt this Period 775.00	
	FEC ID number of contributing federal political committee. C		In-Kind		
	Name of Employer Self Employed	Occupation Information Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1325.00

In kind donation of photography services - party-related

SUBTOTAL of Receipts This Page (optional)	▶	2983.33
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kent Lucken
 Mailing Address 65 Fellsmere Road
 City State Zip Code
 Newton MA 02459
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 20 / 2009
Transaction ID: 90410.C173038
 Amount of Each Receipt this Period
 250.00
 Receipt
 Name of Employer Occupation
 The Citigroup Private Bank Private Banker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
Althine Marsh
 Mailing Address 1213 Heatherwood
 City State Zip Code
 YarmouthPort MA 02675
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 13 / 2009
Transaction ID: 90317.C172875
 Amount of Each Receipt this Period
 500.00
 Receipt
 Name of Employer Occupation
 None Homemaker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
Brad Marston
 Mailing Address 90 Beacon Street
 City State Zip Code
 Boston MA 02108
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 20 / 2009
Transaction ID: 90410.C173048
 Amount of Each Receipt this Period
 250.00
 Receipt
 Name of Employer Occupation
 Information Requested Information Requested
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 42
(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

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

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

A.

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

Mailing Address 11161 NW 24th Street

City Pompano Beach State FL Zip Code 33065

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

Name of Employer The Patron Spirits Company Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 90410.C173010

Amount of Each Receipt this Period 1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
James McManus

Mailing Address 88 Chestnut St

City Weston State MA Zip Code 02493

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

Name of Employer Self Employed Occupation Commercial Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 90410.C173040

Amount of Each Receipt this Period 500.00

Receipt

C.

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

Mailing Address 1010 Waltham St F-19

City Lexington State MA Zip Code 02421-8048

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 90317.C172913

Amount of Each Receipt this Period -5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **-3500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 42
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

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

Mailing Address 48 W Cedar St
DO NOT MAIL

City Boston State MA Zip Code 02114-3302

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

Name of Employer Genzyme Corp. Occupation General manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 90410.C173146
Amount of Each Receipt this Period 5000.00
Receipt

B.

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

Mailing Address 21 Constance Way

City North Attleboro State MA Zip Code 02760

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 90410.C172999
Amount of Each Receipt this Period 250.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Bruce Nilson Jr.

Mailing Address 40 Kings Way, Apt. 401A

City Waltham State MA Zip Code 02451

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

Name of Employer Free and Strong America PAC Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 90410.C173037
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 42

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Michael Potaski

Mailing Address 24B Church Street

City State Zip Code
Linwood MA 01525

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2600.00

Date of Receipt

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

Transaction ID: 90410.C173031

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Harold Pratt

Mailing Address 1010 Memorial Drive
#9A

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Nichols & Pratt, LLP Private Trustee

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

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 90410.C173105

Amount of Each Receipt this Period

250.00

Receipt

C.

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

Mailing Address 11 Beatrice Circle

City State Zip Code
Belmont MA 02478

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

Name of Employer Occupation
VA Boston Healthcare System Surgeon

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

Date of Receipt

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

Transaction ID: 90317.C172757

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) John Shaughnessy		Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 91 Longmeadow Rd.		Transaction ID: 90317.C172855
	City Milton	State MA	Zip Code 02186
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
	Name of Employer Shaughnessy and Ahern	Occupation Businessman	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00
---	-------------------------------------

B.	Full Name (Last, First, Middle Initial) James Sinnott		Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 8 Nobska Way		Transaction ID: 90317.C172792
	City Wareham	State MA	Zip Code 02571
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Dept of Homeland Security	Occupation Special Agent	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00
---	-----------------------------------

C.	Full Name (Last, First, Middle Initial) James Sinnott		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 8 Nobska Way		Transaction ID: 90410.C172987
	City Wareham	State MA	Zip Code 02571
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Dept of Homeland Security	Occupation Special Agent	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Steven Snider
 Mailing Address 114 Shornecliffe Road
 City State Zip Code
 Newton MA 02458-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pyramis Global Advisors Portfolio Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 20 / 2009
Transaction ID: 90320.C172981
 Amount of Each Receipt this Period
 10000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Polly Townsend
 Mailing Address 34 Proctor St
 City State Zip Code
 Manchester MA 01944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2009
Transaction ID: 90410.C173131
 Amount of Each Receipt this Period
 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Francis Venditti
 Mailing Address 160 Warren Avenue
 City State Zip Code
 Seekonk MA 02771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 seekonk speedway Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2009
Transaction ID: 90410.C173120
 Amount of Each Receipt this Period
 500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 11500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 42

(check only one)

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

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

A.

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

Mailing Address 29 Concord Court

City State Zip Code
Bedford MA 01730

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

Name of Employer Occupation
Spaulding and Slye Collins Real Estate Development

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 90317.C172827

Amount of Each Receipt this Period

225.00

Receipt

B.

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

Mailing Address 4 Spinnaker Lane

City State Zip Code
Pocasset MA 02559

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 ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 90410.C172990

Amount of Each Receipt this Period

100.00

Receipt

C.

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

Mailing Address 4 Spinnaker Lane

City State Zip Code
Pocasset MA 02559

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 90410.C172991

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

56358.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 42	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Kristine Willington		Date of Receipt																					
	Mailing Address 12 Arlington Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	4		2	0	0	9														
	City	State	Zip Code	Transaction ID: 90317.C172736																				
	Reading	MA	01867-	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C	1145.14																					
Name of Employer None		Occupation At Home (Housewife)		Offsets to Operating Expenditure																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2290.54																						

SUBTOTAL of Receipts This Page (optional)	▶	1145.14
TOTAL This Period (last page this line number only)	▶	1145.14

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Scr & Associates, LLC	Transaction ID: 90410.E11131
	Mailing Address 4 Leblanc Dr	Date of Disbursement 03 / 19 / 2009
	City Danvers State MA Zip Code 01923-	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Fundraising Consultant Fee - party related non FEA	FUNDRAISING CONSULTANT FEE - PARTY RELATED NON FEA
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) A.I.M. Mutual Insurance Co.	Transaction ID: 90410.E11097
	Mailing Address 54 Third St.	Date of Disbursement 03 / 19 / 2009
	City Burlington State MA Zip Code 01803-	Amount of Each Disbursement this Period 784.00
	Purpose of Disbursement Workers Comp Insurance	WORKERS COMP INSURANCE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts	Transaction ID: 90410.E11087
	Mailing Address Landmark Center 401 Park Drive	Date of Disbursement 03 / 04 / 2009
	City Boston State MA Zip Code 02215-	Amount of Each Disbursement this Period 3835.36
	Purpose of Disbursement Health Insurance	HEALTH INSURANCE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	9619.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 90410.E11123	
	Date of Disbursement 03 / 04 / 2009	
Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 1086.00	
City Hanover	State MA	Zip Code 02339-
Purpose of Disbursement Party related computer IT support	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

B. Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 90410.E11093	
	Date of Disbursement 03 / 19 / 2009	
Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 2339.85	
City Hanover	State MA	Zip Code 02339-
Purpose of Disbursement Party related computer IT support	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

C. Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 90410.E11125	
	Date of Disbursement 03 / 04 / 2009	
Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 329.00	
City Boston	State MA	Zip Code 02127-
Purpose of Disbursement Rent for Storage Unit	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional) ► **3754.85**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 42

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

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

A.	Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 90410.E11092 Date of Disbursement 03 / 19 / 2009
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 329.00
	City Boston State MA Zip Code 02127- Purpose of Disbursement Storage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	STORAGE

B.	Full Name (Last, First, Middle Initial) Kauppi Communications	Transaction ID: 90410.E11114 Date of Disbursement 03 / 04 / 2009
	Mailing Address 27 Townly Road	Amount of Each Disbursement this Period 3000.00
	City Watertown State MA Zip Code 02472- Purpose of Disbursement Communications Consulting Fee - party related non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMMUNICATIONS CONSULTING FEE - PARTY RELATED NON FEA

C.	Full Name (Last, First, Middle Initial) Keswick Consulting	Transaction ID: 90410.E11130 Date of Disbursement 03 / 19 / 2009
	Mailing Address 231 Victory Road	Amount of Each Disbursement this Period 3000.00
	City Quincy State MA Zip Code 02171- Purpose of Disbursement Political Consulting Fee - party related non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLITICAL CONSULTING FEE - PARTY RELATED NON FEA

SUBTOTAL of Disbursements This Page (optional) ▶

6329.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 90410.E11091 Date of Disbursement 03 / 19 / 2009
	Mailing Address PO Box 60036	
	City Los Angeles State CA Zip Code 90060-0036	Amount of Each Disbursement this Period 96.95
	Purpose of Disbursement Cable Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

B.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 90410.E11124 Date of Disbursement 03 / 04 / 2009
	Mailing Address PO Box 371461	
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period 26.51
	Purpose of Disbursement Express Mail Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

C.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 90410.E11090 Date of Disbursement 03 / 19 / 2009
	Mailing Address PO Box 371461	
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period 44.10
	Purpose of Disbursement Express Mail Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

SUBTOTAL of Disbursements This Page (optional)	▶	167.56
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 90410.E11103 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period
	Purpose of Disbursement Express Mail	<input type="text" value="37.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EXPRESS MAIL

B.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 90410.E11136 Date of Disbursement
	Mailing Address 34 Fresno St.	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="503.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 90410.E11106 Date of Disbursement
	Mailing Address 34 Fresno St.	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for parking food and travel	<input type="text" value="180.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT FOR PARKING FOOD AND TRAVEL

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 State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Guardian Guardian</p> <p>Mailing Address Boston Group Office 1 Liberty Square</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement Dental Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11112 Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 499.75</p> <p>DENTAL INSURANCE</p>
<p>B. Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11132 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1298.70</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11137 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1319.20</p> <p>PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)	3117.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Lyndsay Jones	Transaction ID: 90410.E11109 Date of Disbursement 03 / 24 / 2009
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 182.90
	City Quincy State MA Zip Code 02170- Purpose of Disbursement Reimbursement for parking food and travel Candidate Name	REIMBURSEMENT FOR PARKING FOOD AND TRAVEL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 90410.E11133 Date of Disbursement 03 / 05 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 334.05
	City Lynn State MA Zip Code 01902- Purpose of Disbursement Payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Brett Kasper	Transaction ID: 90410.E11138 Date of Disbursement 03 / 19 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 349.82
	City Lynn State MA Zip Code 01902- Purpose of Disbursement Payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	866.77
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 90410.E11126
	Mailing Address 187 Lewis Rd.	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 156.20
	Purpose of Disbursement Reimbursement for parking food and travel	REIMBURSEMENT FOR PARKING FOOD AND TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 90410.E11134
	Mailing Address 187 Lewis Rd.	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 1288.42
	Purpose of Disbursement Payroll	PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Barney Keller	Transaction ID: 90410.E11139
	Mailing Address 187 Lewis Rd.	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 1308.92
	Purpose of Disbursement Payroll	PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2753.54
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Barney Keller</p> <p>Mailing Address 187 Lewis Rd.</p> <p>City Belmont State MA Zip Code 02478-</p> <p>Purpose of Disbursement reimbursement for parking food and travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11146 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 268.40</p> <p>REIMBURSEMENT FOR PARKING FOOD AND TRAVEL</p>
<p>B. Full Name (Last, First, Middle Initial) Amy Kelly</p> <p>Mailing Address 157 Rice Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement In kind donation of photography services - party-related</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.C173266IK Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 775.00</p> <p>IN KIND: IN KIND DONATION OF PHOTOGRAPHY SERVICES - PARTY-RELATED</p>
<p>C. Full Name (Last, First, Middle Initial) Matthew Keswick</p> <p>Mailing Address 231 Victory Road</p> <p>City North Quincy State MA Zip Code 02171-</p> <p>Purpose of Disbursement Reimbursement - see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11141 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 454.40</p> <p>REIMBURSEMENT - SEE BELOW</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1497.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address P.O. Box 619612 VFW Airport</p> <p>City Dallas State TX Zip Code 75261-9612</p> <p>Purpose of Disbursement M. Keswick reimbursement for airfare for party-related conference</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11142 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 454.40</p> <p>[MEMO ITEM] MEMO: M. KESWICK REIMBURSEMENT FOR AIRFARE FOR PARTY-RELATED CONFERENCE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Communication, Inc. Majority</p> <p>Mailing Address 274 Marconi Blvd. Suite 260</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement FEA Voter Contact Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11089 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FEA VOTER CONTACT MAILING</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Merchants Bankcard</p> <p>Mailing Address Fleet Bank 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11148 Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 78.27</p> <p>CREDIT CARD FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1078.27

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Merchants Bankcard</p> <p>Mailing Address Fleet Bank 100 Federal Street</p> <p>City Boston State MA Zip Code 02110-</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11149 Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>CREDIT CARD FEE</p>
<p>B. Full Name (Last, First, Middle Initial) mindShift Technologies, Inc.</p> <p>Mailing Address PO Box 200105</p> <p>City Pittsburgh State PA Zip Code 15251-</p> <p>Purpose of Disbursement Party related computer IT support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11102 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3288.00</p> <p>PARTY RELATED COMPUTER IT SUPPORT</p>
<p>C. Full Name (Last, First, Middle Initial) Konica Minolta Business Systems</p> <p>Mailing Address P.O. Box 7247-0322</p> <p>City Philadelphia State PA Zip Code 19170-0322</p> <p>Purpose of Disbursement Copier Equipment Lease</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11096 Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 722.93</p> <p>COPIER EQUIPMENT LEASE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4035.93

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems	Transaction ID: 90410.E11105
	Mailing Address P.O. Box 7247-0322	Date of Disbursement MM / DD / YYYY 03 / 24 / 2009
	City Philadelphia State PA Zip Code 19170-0322	Amount of Each Disbursement this Period 1294.66
	Purpose of Disbursement Copier Equipment Lease	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	COPIER EQUIPMENT LEASE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Jennifer Nassour	Transaction ID: 90410.E11143
	Mailing Address 49 Chelsea St., Unit C1-307	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City Boston State MA Zip Code 02129-	Amount of Each Disbursement this Period 162.05
	Purpose of Disbursement J. Nassour reimbursement for parking food and travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	J. NASSOUR REIMBURSEMENT FOR PARKING FOOD AND TRAVEL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jennifer Nassour	Transaction ID: 90410.E11144
	Mailing Address 49 Chelsea St., Unit C1-307	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City Boston State MA Zip Code 02129-	Amount of Each Disbursement this Period 439.20
	Purpose of Disbursement Reimbursement - see below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT - SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1895.91
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Jet Blue Airlines	Transaction ID: 90410.E11145 Date of Disbursement 03 / 04 / 2009
	Mailing Address P.O. Box 17435	Amount of Each Disbursement this Period 439.20
	City Salt Lake City State UT Zip Code 84117-	
	Purpose of Disbursement J. Nassour reimbursement for airfare Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: J. NASSOUR REIMBURSEMENT FOR AIRFARE

B.	Full Name (Last, First, Middle Initial) Jennifer Nassour	Transaction ID: 90410.E11147 Date of Disbursement 03 / 24 / 2009
	Mailing Address 49 Chelsea St., Unit C1-307	Amount of Each Disbursement this Period 255.06
	City Boston State MA Zip Code 02129-	
	Purpose of Disbursement Reimbursement for parking food and travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT FOR PARKING FOOD AND TRAVEL

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 90410.E11135 Date of Disbursement 03 / 02 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1441.70
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Tax Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAX

SUBTOTAL of Disbursements This Page (optional)	▶	1696.76
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement Payroll Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90410.E11118 Date of Disbursement 03 / 10 / 2009
	Amount of Each Disbursement this Period 135.36 Category/Type PAYROLL FEE

B. Full Name (Last, First, Middle Initial) Boston Postmaster Mailing Address JW MCCORMACK STATION New Chardon Street City Boston State MA Zip Code 02114- Purpose of Disbursement Non-FEA Party Related Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90410.E11128 Date of Disbursement 03 / 04 / 2009
	Amount of Each Disbursement this Period 840.00 Category/Type NON-FEA PARTY RELATED POSTAGE

C. Full Name (Last, First, Middle Initial) Boston Postmaster Mailing Address JW MCCORMACK STATION New Chardon Street City Boston State MA Zip Code 02114- Purpose of Disbursement Non-FEA Party Related Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90410.E11108 Date of Disbursement 03 / 24 / 2009
	Amount of Each Disbursement this Period 420.00 Category/Type NON-FEA PARTY RELATED POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	1395.36
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 90410.E11120 Date of Disbursement 03 / 04 / 2009
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 6675.99
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail - party related non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT MAIL - PARTY RELATED NON FEA

B.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 90410.E11121 Date of Disbursement 03 / 04 / 2009
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 1015.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail - party related non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT MAIL - PARTY RELATED NON FEA

C.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 90410.E11088 Date of Disbursement 03 / 19 / 2009
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 1000.00
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mail - party related non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT MAIL - PARTY RELATED NON FEA

SUBTOTAL of Disbursements This Page (optional)	8690.99
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address Steve Meyers 1283 Main Street</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement Direct Mail - party related non FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11101</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 402.09</p> <p>DIRECT MAIL - PARTY RELATED NON FEA</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Boston Event Solutions</p> <p>Mailing Address 250 Faneuil Hall Marketplace Quincy Market Building</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement Event catering for party related fundraising- non-FEA event no federal candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11095</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 347.40</p> <p>EVENT CATERING FOR PARTY RELATED FUNDRAISING- NON-FEA EVENT NO FEDERAL CANDIDATE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Staples, Inc.</p> <p>Mailing Address Staples Credit Plan Dept. 80 - 0088936796</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11100</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 210.77</p> <p>OFFICE SUPPLIES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

960.26

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Union Club- Boston The Union Club</p> <p>Mailing Address 8 Park Street</p> <p>City Boston State MA Zip Code 02108-</p> <p>Purpose of Disbursement Room Rental and Catering for Chair Briefing Fundraiser - Non FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11099</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 280.75</p> <p>ROOM RENTAL AND CATERING FOR CHAIR BRIEFING FUNDRAISER - NON FEA</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 1</p> <p>City Worcester State MA Zip Code 01654-</p> <p>Purpose of Disbursement Office Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11117</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 507.83</p> <p>OFFICE PHONE SERVICE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 1</p> <p>City Worcester State MA Zip Code 01654-</p> <p>Purpose of Disbursement Office Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90410.E11115</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 110.05</p> <p>OFFICE PHONE SERVICE</p>

SUBTOTAL of Disbursements This Page (optional)	898.63
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1 City Worcester State MA Zip Code 01654- Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90410.E11098 Date of Disbursement 03 / 24 / 2009
	Amount of Each Disbursement this Period 159.46 CELL PHONE
B. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1 City Worcester State MA Zip Code 01654- Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90414.E11154 Date of Disbursement 03 / 24 / 2009
	Amount of Each Disbursement this Period 97.79 CELL PHONE

SUBTOTAL of Disbursements This Page (optional)	257.25
TOTAL This Period (last page this line number only)	50978.18

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
A. Merck transfer of excess contribution from fed to non-fed

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90317.E11032

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**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)

PAGE 41 / 42

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

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

A.

Full Name (Last, First, Middle Initial)
James Tedisco For Congress

Mailing Address 1707 Route 9

City Clifton Park State NY Zip Code 12065-

Purpose of Disbursement
Candidate Assistance on voter turnout H

Candidate Name
JAMES TEDISCO

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2010
 Primary General
 Other (specify) ▼

004
Category/
Type

Transaction ID: 90414.E11152

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

103.31

IN KIND: CANDIDATE ASSIST-
ANCE ON VOTER TURNOUT H0N-
Y0 8

SUBTOTAL of Disbursements This Page (optional)

103.31

TOTAL This Period (last page this line number only)

103.31

Image# 29933493564

Form/Schedule: F3XN

Transaction ID:

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED A
NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY IS REQ
SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent a letter within 30 days asking
for employer-occupation if one was not provided in order to meet best efforts policy. *** Kristine Willingt-
on - offset to operations -\$1145.40- was for COBRA health-insurance coverage reimbursement (paid to Blue Cross
Blue Shield) on behalf of her husband, former employee, Robert Willington ***
