FEC FORM 3X	AN	PORT OF D DISBU Other Than An	RSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fi		FEC MAILING LAN YPE OR PRINT 🕎		ample:If typing r the lines	ı, type			
Rhode Island Reput								
ADDRESS (number and	street)	00 Post Road						
Check if differ than previousl reported. (AC	y wa	arwick					02886	-
2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛋		S	STATE	ZIPCO	DE 🔺
C00078196			3. IS THIS REPORT		NEW (N) <b>OR</b>	X AM (A)	ENDED	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) Iid-Year on-election	(d) 30-Day <b>Post</b> -Eleci Report for t	he:		12C)	Sep	2G) in the State c	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of t	Electronically F	arc Tondreau Filed by Marc To	ny knowledge ndreau		Da	ate 06	2 0 0 9	2 0 0 9 S.C 437g.
Office Use Only							FEC FOR (Rev. 12/20	M 3X

#### Image# 29933986526

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2 Write or Type Committee Name Rhode Island Republican State Central Committee MM D D Y W м м D D 04 01 2009 0.4 30 2009 Report Covering the Period: From: To: **COLUMN A** COLUMN B **This Period** Calendar Year-to-Date 6. (a) Cash on Hand 45602.99 2009 January 1 (b) Cash on Hand at 45818.15 Begining of Reporting Period ..... 10491.70 23857.86 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 56309.85 69460.85 6(a) and 6(c) for Column B) ..... 5641.79 18792.79 7. Total Disbursements (from Line 31) ..... Cash on Hand at Close of 8. **Reporting Period** 50668.06 50668.06 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed ΒY the committee (Itemize all on 20011.92 Schedule C and/or Schedule D) .....

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

FE6AN026

W	rite or Type Committee Name Rhode Island Republican State Central Cor	nmittee	
R	eport Covering the Period: From: $0^{M} \frac{4}{0}$	0 1 Y Y W Y 0 1	To:
_	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees         (i) Itemized (use Schedule A)	5550.00	15550.00
	(ii) Unitemized	4892.00	
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🅨	10442.00	21267.00
	(b) Political Party Committees	0.00	0.00
	<ul> <li>(c) Other Political Committees <ul> <li>(such as PACs)</li> </ul> </li> <li>(d) Total Contributions (add Lines</li> </ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ►	10442.00	21267.00
12.	Transfers From Affiliated/Other Party Committees	0.00	1000.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	49.70	340.86
	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	1250.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	1250.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10491.70	23857.86
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	10491.70	22607.86

DETAILED SUMMARY PAGE OF RECEIPTS

Page 3

Image# 29933986527

FEC Form 3X (Rev. 06/2004)

Image# 29933986528

### **DETAILED SUMMARY PAGE**

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Operating Expenditures:         <ul> <li>(a) Shared Federal/Non-Federal Activity (from Schedule H4)</li> <li>(b) Federal Schedule H4</li> </ul> </li> </ol>	2031.05	6765.44
(i) Federal Share	3610.74	12027.35
(b) Other Federal Operating	0.00	0.00
Expenditures (c) Total Operating Expenditures	5641.79	18792.79
(add 21(a)(i), (a)(ii) and (b)) <b>P</b> 2. Transfers to Affiliated/Other Party	5041:79	18/92.79
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees 1. Independent Expenditure	0.00	0.00
<ol> <li>Independent Expenditure         <ul> <li>(use Schedule E)</li> <li>Coordinated Expenditures Made by Party</li> </ul> </li> </ol>	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
<ol> <li>Refunds of Contributions To:         <ul> <li>(a) Individuals/Persons Other Than Political Committees</li> <li></li></ul></li></ol>	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
<ul> <li>(d) Total Contribution Refunds</li> <li>(add Lines 28(a), (b), and (c))</li> </ul>	0.00	0.00
<ol> <li>Other Disbursements</li> </ol>	0.00	0.00
<ul> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity (from Schedule H6)</li> </ul>	0.00	0.00
(i) Federal Share		
(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
<ol> <li>Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))</li> </ol>	5641.79	18792.79
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		

#### Image# 29933986529

# DETAILED SUMMARY PAGE

	III. Net Contributions/Operating Expenditures		COLUMN B	
		Total This Period	Calendar Year-to-Date	
33.	Total Contributions (other than loans)	10110.00	04007.00	
	from Line 11(d), page 3)	10442.00	21267.00	
34.	Total Contribution Refunds	0.00	0.00	
	(from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans)	10442.00	21267.00	
	(subtract Line 34 from Line 33)	10442.00	21207.00	
36.	Total Federal Operating Expenditures	2021.05	C7CE 44	
	(add Line 21(a)(i) and Line 21(b))	2031.05	6765.44	
37.	Offsets to Operating Expenditures	49.70	340.86	
	(from Line 15, page 3)			
38.	Net Operating Expenditures	1981.35	6424.58	
	(subtract Line 37 from Line 36)		0424.00	

FE6AN026

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6/20
	· · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	Rhode Island Republican State Centra	al Committee	9	
Α.	Full Name (Last, First, Middle Initial) Marisa Allegra	Date of Receipt		
	Mailing Address 220 Blackstone Blvd			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: SA11AI.6868
	Providence	RI	02906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Self Employed	Occupatio Physicial		_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		350.00	1
	Other (specify)	0 0		1
в.	Full Name (Last, First, Middle Initial) Hermino Correia			Date of Receipt
	Mailing Address 65 Island Drive			M M / D D / Y Y Y Y 04 03 2009
	City	State	Zip Code	Transaction ID: SA11AI.6800
	Coventry	RI	02816	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SE	Occupatio	n	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		250.00	1
		0.0		
C.	Full Name (Last, First, Middle Initial) Michael Cronin			Date of Receipt
-	Mailing Address 72 Cliff Rd.			04 01 2009
	City	State	Zip Code	Transaction ID: SA11AI.6752
	Westio	MA	02493	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	1
	Receipt For:	Aggregate	e Year-to-Date 🔻	-
	Primary General		1000.00	1
	Other (specify)			J
	SUBTOTAL of Receipts This Page (optional) .		·····	1600.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any perso	FOR LINE NUMBER:         PAGE 7 / 20           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17           on for the purpose of soliciting contributions         11         11         12	
	NAME OF COMMITTEE (In Full) Rhode Island Republican State Centra	e name and address of any political committee to al Committee	solicit contributions from such committee.	
<b>A</b> .	Full Name (Last, First, Middle Initial) John Friends of John Loughlin Mailing Address City	Date of Receipt		
	FEC ID number of contributing federal political committee.	C HORI01065	250.00	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	]	
В.	Full Name (Last, First, Middle Initial) Warren Galkin Mailing Address 29 Sage Drive		Date of Receipt	
	City Warwick	State Zip Code RI 02886	Transaction ID: SA11AI.6801 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		500.00	
	Name of Employer Natco Products Corp Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 500.00	]	
- С.	Full Name (Last, First, Middle Initial) Daniel Harrop Vicotry Fund Mailing Address		Date of Receipt	
	City	State Zip Code	0 4     2 9     2 0 0 9       Transaction ID:     SA11AI.6908       Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 250.00	]	
ſ	SUBTOTAL of Receipts This Page (optional) .	۱ 	1000.00	
Ī	TOTAL This Period (last page this line number	r only)		

A. Ke NA Rt NA Fu Ma Cit Sa FE fed Na	commercial purposes, other than using the AME OF COMMITTEE (In Full) hode Island Republican State Central II Name (Last, First, Middle Initial) ornan King ailing Address 115 Crosswynds Drive ty aunderstown C ID number of contributing deral political committee. ame of Employer acceipt For: Primary General Other (specify) ▼	atements may not be sold or used by any personame and address of any political committee to Committee State Zip Code RI 02874 C Occupation Aggregate Year-to-Date ▼ 1250.00	13       14       15       16       11         on for the purpose of soliciting contributions o solicit contributions from such committee.       11         Date of Receipt       0       1       7       2       0       9         Transaction ID: SA11AI.6861       Amount of Each Receipt this Period       250.00       250.00
A. Ke Ma Cit Sa FE fed Na	hode Island Republican State Central III Name (Last, First, Middle Initial) ernan King ailing Address 115 Crosswynds Drive ty aunderstown C ID number of contributing deral political committee. arme of Employer acceipt For: Primary General Other (specify) ▼	State       Zip Code         RI       02874         C       Occupation         Aggregate Year-to-Date       ▼	M       M       M       M       D       D       P       Y
A. <u>Ke</u> Ma Cit Sa FE fec Na	ailing Address 115 Crosswynds Drive ty aunderstown C ID number of contributing deral political committee. ame of Employer acceipt For: Primary General Other (specify) ▼	RI     02874       C     Occupation       Aggregate Year-to-Date     ▼	M       M       M       M       D       D       P       Y
Cit Sa FE feo Na	ty aunderstown C ID number of contributing deral political committee. ame of Employer ecceipt For: Primary General Other (specify) ▼	RI     02874       C     Occupation       Aggregate Year-to-Date     ▼	0 4       1 7       2 0 0 9         Transaction ID: SA11AI.6861         Amount of Each Receipt this Period
<u>Sa</u> FE fed Na	aunderstown C ID number of contributing deral political committee. ame of Employer ecceipt For: Primary General Other (specify) ▼	RI     02874       C     Occupation       Aggregate Year-to-Date     ▼	Amount of Each Receipt this Period
FE fed Na	EC ID number of contributing deral political committee. ame of Employer ecceipt For: Primary General Other (specify) ▼	C Occupation Aggregate Year-to-Date	
fed Na	deral political committee. ame of Employer acceipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date	
	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V	1
Re	Primary General Other (specify) <b>v</b>		1
	Other (specify) 🔻	1250.00	1
	II Name (Last, First, Middle Initial) nristopher Ottiano		Date of Receipt
Ma	ailing Address 141 Kenyon Hill Trail		04 D D / Y Y Y Y 22 2009
Cit	ty	State Zip Code	Transaction ID: SA11AI.6893
W	/yoming	RI 02898	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	350.00
Na Bra al	ame of Employer ain & Spine Neurosurgic-	Occupation Physician	_
	eceipt For:	Aggregate Year-to-Date ▼	
	Primary   General     Other (specify)   Image: Contract of the second	350.00	]
	II Name (Last, First, Middle Initial) aniel Reilly		Date of Receipt
Ma	ailing Address 105 Hedi Drive		04 D D / Y Y Y Y 024 D D / Y Y Y Y
Cit		State Zip Code	Transaction ID: SA11AI.6891
<u>Pc</u>	ortsmouth	RI 02871	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C	250.00
Na Sti	ame of Employer udent	Occupation Student	7
Re	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	]
SUB	TOTAL of Receipts This Page (optional)		850.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 9 / 20           (check only one)         11a         11b         11c         12           13         14         15         16         17
	NAME OF COMMITTEE (In Full) Rhode Island Republican State Centr	Statements may not be sold or used by any perso e name and address of any political committee to al Committee	solicit contributions from such committee.
Z A.	Full Name (Last, First, Middle Initial) Linda Robitaille Mailing Address	Date of Receipt 0 4 0 8 2 0 0 9	
	City	State Zip Code	Transaction ID: SA11AI.6807 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  Aggreg	]
В.	Full Name (Last, First, Middle Initial) Joseph H. Weaver Mailing Address 4 Ledgemont Dr.		Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.6754
	Warwick FEC ID number of contributing federal political committee.	RI 02886	Amount of Each Receipt this Period 1000.00
	Name of Employer F.M. Global Insurance	Occupation Insurance underwriter	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date  1000.00	]
– C.	Full Name (Last, First, Middle Initial) Joseph H. Weaver Mailing Address 4 Ledgemont Dr.		Date of Receipt
	City	State Zip Code	0 4         1 4         2 0 0 9           Transaction ID:         SA11AI.6842
	Warwick FEC ID number of contributing federal political committee.	RI 02886	Amount of Each Receipt this Period 100.00
	Name of Employer F.M. Global Insurance	Occupation Insurance underwriter	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  1100.00	]
ſ	SUBTOTAL of Receipts This Page (optional) .	······	2100.00
F	TOTAL This Period (last page this line number	r only)	5550.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 10 / 20         (check only one)       11a       11b       11c       12         13       14       X       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Rhode Island Republican State Central	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 501 Wampanoag Trail	State	Zip Code	Date of Receipt 0 4 / 0 0 / 2 0 0 9 Transaction ID: SA15.6917
	East Providence FEC ID number of contributing federal political committee.	RI	02915	Amount of Each Receipt this Period 49.70 State Unemployment
	Name of Employer          Receipt For:         Primary       General         Other (specify) ▼	Occupatio Aggregate	n ∋ Year-to-Date ▼ 230.86	]

SUBTOTAL of Receipts This Page (optional)	►	49.70
TOTAL This Period (last page this line number only)	►	49.70

## SCHEDULE C (FEC Form 3X)

SCHEDULE C (FEC Form 3X)			PAGE 11 / 20 FOR LINE 13 OF FORM 3X	
LOANS		Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Con	nmittee	Transa	ction ID: SC/10.4439	
LOAN SOURCE Full Name (Last, First, Midd Carcieri for Governor	lle Initial)		Election: Primary General	
Mailing Address P. O. Box 20415			Other (specify)	
City Cranston	State RI ZIP Code	9 02920		
Original Amount of Loan	Cumulative Payment To D	Date Balance	Outstanding at Close of This Period	
3500.00		0.00	3500.00	
TERMS Date Incurred	Date Due	Interest Ra	te Secured:	
M         M         D         D         Y         Y         Y         Y           03         24         2003 <td></td> <td>0.0000</td> <td>% (apr) Yes X No</td>		0.0000	% (apr) Yes X No	
List All Endorsers or Guarantors (if any) to Loan	Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)			3500.00	
TOTALS This Period (last page in this line only)			.00	
Carry outstanding balance only to LINE 3, Schedul	e D, for this line. If no Sched	ule D, carry forward to appro	priate line of Summary.	

FEC Schedule C ( Form 3X ) (Revised 02/2003)

# SCHEDULE C (FEC Form 3X)

SCHEDULE C (FEC Form 3X)			PAGE 12/20	
LOANS		Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Cor	nmittee	Tra	nsaction ID: SC/10.4441	
LOAN SOURCE Full Name (Last, First, Mide Carcieri for Governor	lle Initial)		Election: Primary General	
Mailing Address P. O. Box 20415			☐ Other (specify) ▼	
City Cranston	State RI ZIP Code	02920		
Original Amount of Loan	Cumulative Payment To D	ate Bala	nce Outstanding at Close of This Period	
5000.00		0.00	5000.00	
TERMS Date Incurred	Date Due	Interest	Rate Secured:	
M         M         D         D         Y		0.0000	% (apr) Yes X No	
List All Endorsers or Guarantors (if any) to Loar	n Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional) .			5000.00	
TOTALS This Period (last page in this line only)			8500.00	
Carry outstanding balance only to LINE 3, Schedul			propriate line of Summary.	

FEC Schedule C ( Form 3X ) (Revised 02/2003)

SCHEDIII E D (EEC Form 2V)				PAGE 13 / 20	
SCHEDULE D (FEC Form 3X)			separate edule(s)	FOR LINE NUMBER:	
DEBTS AND OBLIGATIONS			r each	(check only one) 9	
Excluding Loans		numt	pered line)	X 10	
NAME OF COMMITTEE (In Full)	11				
Rhode Island Republican State Central Comm	ittee				
A. Full Name (Last, First, Middle Initial) of Debtor Campaign Solutions	or Creditor			ebt (Purpose): il Back Debt	
Mailing Address 228 South Washington Stre	et				
City State Alexandria VA	ZIP Code 22314				
Outstanding Balance Beginning This Period			Tra	nsaction ID: SD10.4144	
1500.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period	
0.00	0.00			1500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor Timothy Costa	or Creditor		Nature of D Back Pay	ebt (Purpose):	
Mailing Address 84 Enfield Avenue					
City State Providence RI	ZIP Code 02908				
Outstanding Balance Beginning This Period			Tra	nsaction ID: SD10.4146	
2500.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period	
0.00	0.00			2500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor Hasley Properties	or Creditor		Nature of D Rent Back	ebt (Purpose): < Debt	
Mailing Address 18 Burnside Street					
City State Bristol RI	ZIP Code 02809				
Outstanding Balance Beginning This Period			Tra	nsaction ID: SD10.4148	
1587.39					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period	
0.00	0.00	1		1587.39	
1) SUBTOTALS This Period This Page (optional)		►		5587.39	
2) TOTALS This Period (last page this line number o		•			
3) TOTAL OUTSTANDING LOANS from Schedul	e C (last page only)	•			
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only	r) <b>&gt;</b>			

	<b>F</b> 0)()				PAGE 14 / 20
SCHEDULE D (FEC Form 3X)			e separate	FOR LINE NUMBER:	
DEBTS AND OBLIG	DEBTS AND OBLIGATIONS			hedule(s) or each	(check only one) 9
Excluding Loans				bered line)	(choose ching ching) X 10
NAME OF COMMITTEE	(In Full)				
Rhode Island Republic	can State Central Comm	nittee			
	irst, Middle Initial) of Debtor	or Creditor			ebt (Purpose):
JLM Consulting				Travel Ba	ck Debt
Mailing Address Info	Democrated			-	
Mailing Address Info	Requested				
City	State	ZIP Code		-	
Alexandria	VA	22314			
Outstanding Balanc	e Beginning This Period			Tra	nsaction ID: SD10.4150
				i i a	
	1000.00				
Amount Incu	irred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period
	0.00	0.00			1000.00
B. Full Name (Last. F	First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
Kentish Guards	. ,				Back Debt
				-	
Mailing Address Mai	in Street				
City	State	ZIP Code		-	
East Greenwich	RI	02818			
				_	
Outstanding Balanc	e Beginning This Period			Tra	nsaction ID: SD10.4152
	226.00				
Amount Incu	irred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period
	0.00	0.00			226.00
	0.00	0.00			220.00
C. Full Name (Last. F	First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
Richard Kizarian	,,,			Event Exp	Photography Back
				Debt	
Mailing Address 337	7 Sastram Street				
City	State	ZIP Code		-	
Providence	RI	02908			
	e Beginning This Period			Tue	
				Ira	nsaction ID: SD10.4160
	600.00				
Amount Incu	irred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period
	0.00	0.00			600.00
		0.00			000.00
l					
1) SUBTOTALS This P	Period This Page (optional)		l		1826.00
2) TOTALS This Period	(last page this line number of	only)			
3) TOTAL OUTSTANDI	NG LOANS from School	le C (last page only)	1		
		ie o (iast page only)			
4) ADD 2) and 3) and c	arry forward to appropriate li	ne of Summary Page (last page only	/) 1		
	, , , , , , , , , , , , , , , , , , , ,	, , , , , ,			

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		(Use separ schedule(		FOR LINE NUMBER:	
DEBTS AND OBLIGATIONS			for each	n	(check only one) 9
Excluding Loans			numbered l	line)	X 10
NAME OF COMMITTEE					
Rhode Island Republi	can State Central Comr	nittee			
A Full Name (Least F	Tivet Midelle Initial) of Debte		Natur		
Providence Marriot	First, Middle Initial) of Debtor	r or Greditor			ebt (Purpose): Election 2000
	L. C.		2001		
Mailing Address Orr	ms Street				
City Providence	State RI	ZIP Code 02903			
		02903			
Outstanding Balance	ce Beginning This Period			Trar	isaction ID: SD10.4154
	1198.53				
Amount Inci	urred This Period	Payment This Period	Outs	standir	g Balance at Close of This Period
				Starian	
	0.00	0.00			1198.53
			Nation		
Hon Joan Quick	First, Middle Initial) of Debto	r or Greditor	Back		ebt (Purpose):
			Daon	( i uy	
Mailing Address 16-	-G Mullen Hill Road				
City	State	ZIP Code			
Little Compton	RI	02837			
				_	saction ID: SD10.4156
Outstanding Balance	ce Beginning This Period			Trar	Saction ID: 3D10.4136
Outstanding Balance	2575.00			Trar	Solution ID: 5010.4156
	2575.00	Payment This Period	Oute		
	2575.00 urred This Period	Payment This Period			g Balance at Close of This Period
	2575.00	Payment This Period			
Amount Inci	2575.00 urred This Period 0.00	0.00		standir	g Balance at Close of This Period 2575.00
Amount Inco	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor	0.00	Natur	standir re of De	g Balance at Close of This Period 2575.00 ebt (Purpose):
Amount Inci	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor	0.00	Natur	standir re of De	g Balance at Close of This Period 2575.00
Amount Inco	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor	0.00	Natur	standir re of De	g Balance at Close of This Period 2575.00 ebt (Purpose):
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza	0.00	Natur	standir re of De	g Balance at Close of This Period 2575.00 ebt (Purpose):
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State	r or Creditor ZIP Code	Natur	standir re of De	g Balance at Close of This Period 2575.00 ebt (Purpose):
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI	0.00	Natur	e of Dent	g Balance at Close of This Period 2575.00 abt (Purpose): Back Debt
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State	r or Creditor ZIP Code	Natur	e of Dent	g Balance at Close of This Period 2575.00 ebt (Purpose):
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI	r or Creditor ZIP Code	Natur	e of Dent	g Balance at Close of This Period 2575.00 abt (Purpose): Back Debt
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period	r or Creditor ZIP Code	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 abt (Purpose): Back Debt
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State Rl ce Beginning This Period 325.00 urred This Period	0.00 r or Creditor ZIP Code 02903 Payment This Period	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 abt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00	ZIP Code 02903	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State Rl ce Beginning This Period 325.00 urred This Period	0.00 r or Creditor ZIP Code 02903 Payment This Period	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 abt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period
Amount Incu C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Incu	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00	ZIP Code       02903   Payment This Period       0.00	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 bbt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period
Amount Incu Amount Incu C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Incu Amount Incu	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00 Period This Page (optional).	ZIP Code       02903   Payment This Period       0.00	Outs	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period 325.00 4098.53
Amount Incu Amount Incu C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Incu Amount Incu	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00 Period This Page (optional).	ZIP Code       02903   Payment This Period       0.00	Natur Even	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period 325.00
Amount Incu Amount Incu C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Incu Amount Incu I) SUBTOTALS This F 2) TOTALS This Period	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00 Period This Page (optional).	0.00 r or Creditor ZIP Code 02903 Payment This Period 0.00	Outs	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period 325.00 4098.53 11511.92
Amount Incu Amount Incu C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Incu Incu Amount Incu	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00 Period This Page (optional).	ZIP Code       02903   Payment This Period       0.00	Outs	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period 325.00 4098.53
Amount Inco Amount Inco C. Full Name (Last, F Ralph Stuart Band Mailing Address 3 F City Providence Outstanding Baland Amount Inco II) SUBTOTALS This F 2) TOTALS This Period 3) TOTAL OUTSTANDI	2575.00 urred This Period 0.00 First, Middle Initial) of Debtor Regency Plaza State RI ce Beginning This Period 325.00 urred This Period 0.00 Period This Page (optional). I (last page this line number NG LOANS from Schedu	0.00 r or Creditor ZIP Code 02903 Payment This Period 0.00	Outs	e of Dent Exp	g Balance at Close of This Period 2575.00 ebt (Purpose): Back Debt saction ID: SD10.4158 g Balance at Close of This Period 325.00 4098.53 11511.92

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FEDERAL/NONFEDE		1		FOR LINE 21a OF FORM 3X
NAME OF COMMIITTEE (In Full)				
Rhode Island Republican S	tate Central Com	mittee		
A. Full Name (Last, First, Mi	ddle Initial)			Type of Allocated Activity:
Lammis Vargas				Administrative Fundraising Exempt
Mailing Address 37 Cato Ave.				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Pawtucket	RI	02860	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Salary			Category/ Type	13493.60
Activity or Event Identifier: Administrative				Date 0.4 / 0.3 / Y Y Y Y Transaction ID: H4.6738
FEDERAL SH	IARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	211.72		376.38	588.10
<b>B.</b> Full Name (Last, First, Mi Paychex	ddle Initial)			Type of Allocated Activity:
Mailing Address 501 Wampanoag Trail				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
East Providence	RI	02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes			Category/ Type	13711.47
Activity or Event Identifier: Administrative			<u> </u>	Date 0.4 / 0.3 / 2009 Transaction ID: H4.6745
FEDERAL SH	IARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	78.43		139.44	217.87
<b>C.</b> Full Name (Last, First, Mi Lammis Vargas	ddle Initial)			Type of Allocated Activity:
Mailing Address				
37 Cato Ave.				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Pawtucket	RI	02860	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Salary			Category/ Type	14299.57
Activity or Event Identifier: Administrative				Date 0.4 / D D / Y Y Y Y Transaction ID: H4.6739
FEDERAL SH	IARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	211.72		376.38	588.10
SUBTOTAL of Allocated Federa FEDERAL SH		, ,	SHARE	= TOTAL AMOUNT
	501.87		892.20	1394.07
TOTAL This Period (last page for				
FEDERAL SH	IARE	NONFEDERA	L SHARE	TOTAL AMOUNT
		L		

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				FOR LINE 21a OF FORM 3X
AME OF COMMITTEE (In Full)				
hode Island Republican	State Central Com	mittee		
A. Full Name (Last, First, N	(iddle Initial)			Type of Allocated Activity:
Lammis Vargas				Administrative Fundraising Exempt
Mailing Address				
37 Cato Ave.				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Pawtucket	RI	02860	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Salary			Category/ Type	14887.67
Activity or Event Identifier: Administrative				Date 0.4 / 0 0 / Y Y Y Y Transaction ID: H4.6740
FEDERAL S	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	211.72		376.38	588.10
<b>B.</b> Full Name (Last, First, N Paychex	fiddle Initial)			Type of Allocated Activity:
Mailing Address				X Administrative Fundraising Exempt
501 Wampanoag Trail				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
East Providence	RI	02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes			Category/ Type	15105.54
Activity or Event Identifier: Administrative			Турс	Date 0.4 10 2009 Transaction ID: H4.6746
FEDERAL S	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	78.43		139.44	217.87
<b>C.</b> Full Name (Last, First, N Paychex	fiddle Initial)			Type of Allocated Activity:
Mailing Address				Voter Drive Direct Candidate Support
501 Wampanoag Trail				
City	State	Zip Code		Public Comm (ref to party only) by PAC
East Providence	RI	02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes			Category/ Type	15323.41
Activity or Event Identifier: Administrative			•	Date 0.4 / D D / Y Y Y Y Transaction ID: H4.6747
FEDERAL S	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	78.43		139.44	217.87
IBTOTAL of Allocated Feder	al and NonFederal Ac	tivity This Page		
FEDERAL S	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	368.58		655.26	1023.84
DTAL This Period (last page	• / (	( )()		
FEDERAL S	NARE	NONFEDERA	L SHAKE	TOTAL AMOUNT

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		1			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Rhode Island Republican S	State Central Corr	nmittee			
A. Full Name (Last, First, M	iddle Initial)			Type of Allocated Activit	y:
Lammis Vargas		X Administrative	Fundraising Exempt		
Mailing Address 37 Cato Ave.				Voter Drive	Direct Candidate Support
City	State	Zip Code		Public Comm (ref t	o party only) by PAC
Pawtucket	RI	02860	001	Allocated Activity or E	
Purpose of Disbursement: Salary			Category/ Type		15911.51
Activity or Event Identifier: Administrative			Гіуре	Date 0.4 / 1 Transaction ID: H4.	
FEDERAL SI	HARE H	H NONFEDERAL	SHARE		_ AMOUNT
	211.72		376.38		588.10
<b>B.</b> Full Name (Last, First, M Lammis Vargas	iddle Initial)			Type of Allocated Activit	y: Fundraising Exempt
Mailing Address 37 Cato Ave.					Direct Candidate Support
City	State	Zip Code		Public Comm (ref t	o party only) by PAC
Pawtucket	RI	02860	001	Allocated Activity or E	event Year-To-Date
Purpose of Disbursement: Salary			Category/ Type		16499.61
Activity or Event Identifier: Administrative				Date 0 4 / 1 Transaction ID: H4.	
FEDERAL SH	HARE H	H NONFEDERAL	SHARE	= TOTAL	AMOUNT
	211.72		376.38		588.10
<b>C.</b> Full Name (Last, First, M Paychex	iddle Initial)			Type of Allocated Activit	y: Fundraising 🔲 Exempt
Mailing Address				Voter Drive	· · · · · · · · · · · · · · · · · · ·
501 Wampanoag Trail					Direct Candidate Support
City	State	Zip Code			o party only) by PAC
East Providence	RI	02915	001	Allocated Activity or E	event Year-To-Date
Purpose of Disbursement: payroll taxes			Category/ Type		16717.48
Activity or Event Identifier: Administrative			1,1,50	Date 04 / 1 Transaction ID: H4.	D / Y Y Y Y 7 2009
FEDERAL SI	HARE H	H NONFEDERAL	SHARE		_ AMOUNT
	78.43		139.44		217.87
SUBTOTAL of Allocated Federa	al and NonFederal A	ctivity This Page			
FEDERAL SH	HARE H	H NONFEDERAL	SHARE	= TOTAL	_ AMOUNT
	501.87		892.20		1394.07
TOTAL This Period (last page t	for each line only)(Fe	ederal share to 21(a)(i) and	NonFederal shar	re to 21(a)(i))	
FEDERAL SH	HARE	NONFEDERA	L SHARE	TOTAL	_ AMOUNT

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			FOR LINE 21a OF FORM 3X
hode Island Republican State Central (	Committee		
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Paychex			Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
501 Wampanoag Trail			
City State	Zip Code	001	Public Comm (ref to party only) by PAC
East Providence RI	02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes		Category/ Type	16935.35
Activity or Event Identifier: Administrative			M         M         /         D         D         /         Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
78.43		139.44	217.87
B. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Lammis Vargas			Administrative Eundraising Exempt
Mailing Address 37 Cato Ave.			Voter Drive Direct Candidate Support
City State	Zip Code	-	Public Comm (ref to party only) by PAC
Pawtucket RI	02860	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Salary		Category/ Type	17523.45
Activity or Event Identifier: Administrative		. 75-	Date 0 4 / 2 4 / 2 0 0 9 Transaction ID: H4.6743
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
211.72		376.38	588.10
<b>C.</b> Full Name (Last, First, Middle Initial) Lammis Vargas			Type of Allocated Activity:
Mailing Address			Voter Drive Direct Candidate Support
37 Cato Ave.			
City State	Zip Code	001	Public Comm (ref to party only) by PAC
Pawtucket RI Purpose of Disbursement:	02860		Allocated Activity or Event Year-To-Date
Salary		Category/ Type	18111.55
Activity or Event Identifier: Administrative			M         M         /         D         D         /         Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
211.72		376.38	588.10
BTOTAL of Allocated Federal and NonFeder	al Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
501.87		892.20	1394.07
TAL This Period (last page for each line only FEDERAL SHARE	r)(Federal share to 21(a)(i) and NONFEDER		re to 21(a)(i)) TOTAL AMOUNT

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		FOR LINE 21a OF FORM 3X
NAME OF COMMIITTEE (In Full)		
Rhode Island Republican State Central Committee		
• • • • • • • • • • • • • • • • • •		1
A. Full Name (Last, First, Middle Initial) Paychex		Type of Allocated Activity:
		Administrative - Fundraising - Exempt
Mailing Address		Voter Drive Direct Candidate Support
501 Wampanoag Trail	-	
City State Zip Code		Public Comm (ref to party only) by PAC
East Providence RI 02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes	Category/ Type	18329.42
Activity or Event Identifier: Administrative		Date 0 4 2 4 2 0 0 9 Transaction ID: H4.6750
FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
78.43	139.44	217.87
B. Full Name (Last, First, Middle Initial)		Type of Allocated Activity:
Paychex		Administrative Eundraising Exempt
Mailing Address		Voter Drive Direct Candidate Support
501 Wampanoag Trail		
City State Zip Code		Public Comm (ref to party only) by PAC
East Providence RI 02915	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: payroll taxes	Category/ Type	18547.29
Activity or Event Identifier: Administrative	1 1900	Date 0 4 2 4 2 0 0 9 Transaction ID: H4.6751
FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
78.43	139.44	217.87

SUBTOTAL of Allocated Federal and NonFederal A	Activity This Page	
FEDERAL SHARE	+ NONFEDERAL SHARE 278.88	= TOTAL AMOUNT 435.74
TOTAL This Period (last page for each line only) (Federal share to 21(a)(i) and NonFederal share to 21(a)(i))		
FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2031.05	3610.74	5641.79