

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
Rhode Island Republican State Central Committee

ADDRESS (number and street) 1800 Post Road
Suite 17-1
 Check if different than previously reported. (ACC)
Warwick RI 02886

2. **FEC IDENTIFICATION NUMBER** C00078196
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 (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of RI

5. Covering Period 10 01 2010 through 11 22 2010

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 Marc Tondreau

Signature of Treasurer Electronically Filed by Marc Tondreau Date 12 02 2010

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 **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Rhode Island Republican State Central Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		46687.93
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	47334.98									
(c) Total Receipts (from Line 19)	26000.00	65844.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	73334.98	112532.56								
7. Total Disbursements (from Line 31)	26770.73	65968.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46564.25	46564.25								
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)	20011.92									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Rhode Island Republican State Central Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	0.00	1000.00
(ii) Unitemized	0.00	405.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	1405.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1000.00	2405.00
12. Transfers From Affiliated/Other Party Committees	25000.00	58000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	9.47
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	5430.16
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	5430.16
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26000.00	65844.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26000.00	60414.47

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	2293.46	15398.38
(ii) Non-Federal Share.....	4077.27	27422.68
(b) Other Federal Operating Expenditures.....	0.00	522.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6370.73	43343.31
22. Transfers to Affiliated/Other Party Committees.....	20400.00	22625.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	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))..	26770.73	65968.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22693.46	38545.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 18

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)	1000.00	2405.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1000.00	2405.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2293.46	15920.63
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	9.47
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2293.46	15911.16

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 18
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
Rhode Island Republican State Central Committee

A.

Full Name (Last, First, Middle Initial) Haleys PAC		Date of Receipt
Mailing Address P.O. Box 1186		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
City	State	Zip Code
Jackson	MS	39215
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.7412
<input type="text" value="C"/> <input type="text" value="C00406314"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 18	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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)
Rhode Island Republican State Central Committee

A.	Full Name (Last, First, Middle Initial) Republican Natl Committee		Date of Receipt
	Mailing Address 310 First Street, SE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20003
	FEC ID number of contributing federal political committee.		Transaction ID: SA12.7403
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="41000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="25000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="25000.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Rhode Island Republican State Central Committee

A.

Full Name (Last, First, Middle Initial)
Rhode Island Republican State Central Committee

Transaction ID: SB22.7401

Date of Disbursement

^M 1	^M 0	/	^D 2	^D 2	/	^Y 2	^Y 0	^Y 1	^Y 0
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Mailing Address 1800 Post Road
Suite 17-1

Amount of Each Disbursement this Period

400.00

City Warwick State RI Zip Code 02886

Purpose of Disbursement

003
Category/ Type

Candidate Name
R. I. REPUBLICAN STATE CENTRAL COMM

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: RI District:

B.

Full Name (Last, First, Middle Initial)
Rhode Island Republican State Central Committee

Transaction ID: SB22.7408

Date of Disbursement

^M 1	^M 0	/	^D 2	^D 7	/	^Y 2	^Y 0	^Y 1	^Y 0
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Mailing Address 1800 Post Road
Suite 17-1

Amount of Each Disbursement this Period

20000.00

City Warwick State RI Zip Code 02886

Purpose of Disbursement

008
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

20400.00

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

20400.00

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee
Transaction ID: SC/10.4439

LOAN SOURCE Full Name (Last, First, Middle Initial) Carcieri for Governor	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P. O. Box 20415	
City Cranston State RI ZIP Code 02920	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	0.00	3500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 03 D D 24 Y Y Y Y 2003		0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 / 18 FOR LINE 13 OF FORM 3X
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LOANS

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

Transaction ID: SC/10.4441

LOAN SOURCE Full Name (Last, First, Middle Initial) Carcieri for Governor	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P. O. Box 20415	
City Cranston State RI ZIP Code 02920	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:						
<table style="font-size: 0.8em;"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>0 6</td> <td>1 0</td> <td>2 0 0 3</td> </tr> </table>	M M	D D	Y Y Y Y	0 6	1 0	2 0 0 3		0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M M	D D	Y Y Y Y							
0 6	1 0	2 0 0 3							

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: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

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, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions	Nature of Debt (Purpose): Direct Mail Back Debt
Mailing Address 228 South Washington Street	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 1500.00	Transaction ID: SD10.4144	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Timothy Costa	Nature of Debt (Purpose): Back Pay
Mailing Address 84 Enfield Avenue	
City State ZIP Code Providence RI 02908	

Outstanding Balance Beginning This Period 2500.00	Transaction ID: SD10.4146	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hasley Properties	Nature of Debt (Purpose): Rent Back Debt
Mailing Address 18 Burnside Street	
City State ZIP Code Bristol RI 02809	

Outstanding Balance Beginning This Period 1587.39	Transaction ID: SD10.4148	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1587.39

1) SUBTOTALS This Period This Page (optional).....	5587.39
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JLM Consulting			Nature of Debt (Purpose): Travel Back Debt
Mailing Address Info Requested			
City Alexandria	State VA	ZIP Code 22314	

Outstanding Balance Beginning This Period 1000.00		Transaction ID: SD10.4150	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kentish Guards			Nature of Debt (Purpose): Event Exp Back Debt
Mailing Address Main Street			
City East Greenwich	State RI	ZIP Code 02818	

Outstanding Balance Beginning This Period 226.00		Transaction ID: SD10.4152	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 226.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Kizarian			Nature of Debt (Purpose): Event Exp Photography Back Debt
Mailing Address 337 Sastram Street			
City Providence	State RI	ZIP Code 02908	

Outstanding Balance Beginning This Period 600.00		Transaction ID: SD10.4160	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1826.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Providence Marriot	Nature of Debt (Purpose): Event Exp Election 2000
Mailing Address Orms Street	
City State ZIP Code Providence RI 02903	

Outstanding Balance Beginning This Period 1198.53	Transaction ID: SD10.4154	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1198.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hon Joan Quick	Nature of Debt (Purpose): Back Pay
Mailing Address 16-G Mullen Hill Road	
City State ZIP Code Little Compton RI 02837	

Outstanding Balance Beginning This Period 2575.00	Transaction ID: SD10.4156	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2575.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ralph Stuart Band	Nature of Debt (Purpose): Event Exp Back Debt
Mailing Address 3 Regency Plaza	
City State ZIP Code Providence RI 02903	

Outstanding Balance Beginning This Period 325.00	Transaction ID: SD10.4158	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 325.00

1) SUBTOTALS This Period This Page (optional).....	4098.53
2) TOTALS This Period (last page this line number only).....	11511.92
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	8500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	20011.92

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) Cranston Country Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	36666.33		
Cranston	RI	003			
Purpose of Disbursement:			Category/Type		
Administrative					
Activity or Event Identifier:			Date		
Administrative			MM / DD / YYYY 10 / 04 / 2010		
			Transaction ID: H4.7392		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.76		138.24		216.00

B. Full Name (Last, First, Middle Initial) Cranston Country Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	37600.33		
Cranston	RI	003			
Purpose of Disbursement:			Category/Type		
Administrative					
Activity or Event Identifier:			Date		
Administrative			MM / DD / YYYY 10 / 04 / 2010		
			Transaction ID: H4.7394		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
336.24		597.76		934.00

C. Full Name (Last, First, Middle Initial) US Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address			Allocated Activity or Event Year-To-Date		
24 Corliss St.			37617.93		
City	State	Zip Code			
24 Corliss St.	RI	02903	001		
Purpose of Disbursement:			Category/Type		
Postage					
Activity or Event Identifier:			Date		
Administrative			MM / DD / YYYY 10 / 06 / 2010		
			Transaction ID: H4.7395		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.34		11.26		17.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.34		747.26		1167.60

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

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) Tech 911			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 990 West Shore Road,			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">37842.93</div>	
City Warwick	State RI	Zip Code <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">10 / 06 / 2010</div>	
Purpose of Disbursement: Office Expense			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.7396	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.00		144.00		225.00

B. Full Name (Last, First, Middle Initial) Barrington Shell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 242 County Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">37894.40</div>	
City Barrington	State RI	Zip Code <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">002</div>	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">10 / 06 / 2010</div>	
Purpose of Disbursement: Travel			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">002</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.7398	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.53		32.94		51.47

C. Full Name (Last, First, Middle Initial) Giovanni Cicione			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 86 Ferry Lane			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">37994.40</div>	
City Barrington	State RI	Zip Code 02806	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">10 / 14 / 2010</div>	
Purpose of Disbursement: Misc			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.7400	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		64.00		100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.53		240.94		376.47

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

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) US Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 24 Corliss St.			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">38038.40</div>	
City	State	Zip Code	001	
24 Corliss St.	RI	02903	Category/ Type	
Purpose of Disbursement: postage				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 22 / 2010</div>	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.84		28.16		44.00

B. Full Name (Last, First, Middle Initial) Barrington Shell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 242 County Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">38100.07</div>	
City	State	Zip Code	002	
Barrington	RI		Category/ Type	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 24 / 2010</div>	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.20		39.47		61.67

C. Full Name (Last, First, Middle Initial) Giovanni Cicione			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 86 Ferry Lane			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">39295.93</div>	
City	State	Zip Code	001	
Barrington	RI	02806	Category/ Type	
Purpose of Disbursement: Copies				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 25 / 2010</div>	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
430.51		765.35		1195.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.55		832.98		1301.53

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

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial) Spada Media			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 540			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">42295.93</div>	
City	State	Zip Code	003	
Barrington	RI	02806	Category/ Type	
Purpose of Disbursement: Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0 Transaction ID: H4.7406	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.00		1920.00		3000.00

B. Full Name (Last, First, Middle Initial) Citizens Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 789			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">42308.93</div>	
City	State	Zip Code	001	
Providence	RI	02901-0789	Category/ Type	
Purpose of Disbursement: bank fee Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0 Transaction ID: H4.7414	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.68		8.32		13.00

C. Full Name (Last, First, Middle Initial) Gleason's Package Store			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">42676.47</div>	
City	State	Zip Code	007	
			Category/ Type	
Purpose of Disbursement: Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0 Transaction ID: H4.7409	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.31		235.23		367.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1216.99		2163.55		3380.54

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

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

A. Full Name (Last, First, Middle Initial)
Harland Clarke

Mailing Address

City State Zip Code

001

Purpose of Disbursement:
checks

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42821.06

Activity or Event Identifier:
Administrative

Date

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

Transaction ID: H4.7415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.05		92.54		144.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.05		92.54		144.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2293.46	4077.27	6370.73