

# 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  
 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 (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 04 01 2009 through 04 30 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 Marc Tondreau

Signature of Treasurer Electronically Filed by Marc Tondreau Date 05 20 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Rhode Island Republican State Central Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

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		45602.99
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	45818.15									
(c) Total Receipts (from Line 19) .....	10491.70	23857.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	56309.85	69460.85								
7. Total Disbursements (from Line 31) .....	5641.79	18792.79								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50668.06	50668.06								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Rhode Island Republican State Central Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

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	5550.00	15550.00
(i) Itemized (use Schedule A) .....	4892.00	5717.00
(ii) Unitemized .....	10442.00	21267.00
(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) .....	10442.00	21267.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	1000.00
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) .....	49.70	340.86
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	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 Disbursements

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.....	2031.05	6765.44
(ii) Non-Federal Share.....	3610.74	12027.35
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5641.79	18792.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent 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))..	5641.79	18792.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2031.05	6765.44

**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) .....	10442.00	21267.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10442.00	21267.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2031.05	6765.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	49.70	340.86
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1981.35	6424.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Marisa Allegra		Date of Receipt MM / DD / YYYY 04 / 17 / 2009		
	Mailing Address 220 Blackstone Blvd		<b>Transaction ID:</b> SA11AI.6868		
	City Providence	State RI	Zip Code 02906	Amount of Each Receipt this Period 350.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Employed	Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Hermino Correia		Date of Receipt MM / DD / YYYY 04 / 03 / 2009		
	Mailing Address 65 Island Drive		<b>Transaction ID:</b> SA11AI.6800		
	City Coventry	State RI	Zip Code 02816	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SE	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Cronin		Date of Receipt MM / DD / YYYY 04 / 01 / 2009		
	Mailing Address 72 Cliff Rd.		<b>Transaction ID:</b> SA11AI.6752		
	City Westio	State MA	Zip Code 02493	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> 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 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
John Friends of John Loughlin

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** H0RI01065

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** SA11AI.6836

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Warren Galkin

Mailing Address 29 Sage Drive

City State Zip Code  
Warwick RI 02886

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

Name of Employer Natco Products Corp Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 3 / 2 0 0 9

**Transaction ID:** SA11AI.6801

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel Harrop Vicotry Fund

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.6908

Amount of Each Receipt this Period  
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 8 / 20

(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)  
Rhode Island Republican State Central Committee

**A.**

Full Name (Last, First, Middle Initial)  
Kernan King

Mailing Address 115 Crosswynds Drive

City State Zip Code  
Saunderstown RI 02874

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	9

Transaction ID: SA11AI.6861

Amount of Each Receipt this Period

250.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Christopher Ottiano

Mailing Address 141 Kenyon Hill Trail

City State Zip Code  
Wyoming RI 02898

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

Name of Employer Occupation  
Brain & Spine Neurosurgical Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	9

Transaction ID: SA11AI.6893

Amount of Each Receipt this Period

350.00
--------

**C.**

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

Mailing Address 105 Hedi Drive

City State Zip Code  
Portsmouth RI 02871

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

Name of Employer Occupation  
Student Student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	9

Transaction ID: SA11AI.6891

Amount of Each Receipt this Period

250.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ►

850.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 20  
(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)  
Rhode Island Republican State Central Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Linda Robitaille</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 08 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.6807</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Joseph H. Weaver</p> <p>Mailing Address 4 Ledgemont Dr.</p> <p>City State Zip Code Warwick RI 02886</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation F.M. Global Insurance Insurance underwriter</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 02 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.6754</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Joseph H. Weaver</p> <p>Mailing Address 4 Ledgemont Dr.</p> <p>City State Zip Code Warwick RI 02886</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation F.M. Global Insurance Insurance underwriter</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 14 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.6842</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2100.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">5550.00</span>

# 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)

<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)  
Rhode Island Republican State Central Committee

A.

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 501 Wampanoag Trail

City State Zip Code  
East Providence RI 02915

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.86

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

Transaction ID: SA15.6917

Amount of Each Receipt this Period  
49.70

State Unemployment

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	49.70
<b>TOTAL</b> This Period (last page this line number only) .....	▶	49.70

**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**

<b>LOAN SOURCE</b> 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 3500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3500.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>3</td></tr> </table>	M	M	0	3	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>2</td><td>4</td></tr> </table>	D	D	2	4	<table style="font-size: small;"> <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>3</td></tr> </table>	Y	Y	Y	Y	2	0	0	3	0.0000 % (apr) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
0	3																		
D	D																		
2	4																		
Y	Y	Y	Y																
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"/>
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"/>
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"/>
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"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="3500.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value=".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 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/10.4441**

<b>LOAN SOURCE</b> 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:
M M 06 D D 10 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: <input style="width: 100%;" type="text"/>
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"/>
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"/>
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"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="5000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="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

<b>A.</b> 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	<b>Transaction ID: SD10.4144</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

<b>B.</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	<b>Transaction ID: SD10.4146</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

<b>C.</b> 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	<b>Transaction ID: SD10.4148</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1587.39

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>5587.39</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="1000.00"/>		<b>Transaction ID: SD10.4150</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="226.00"/>		<b>Transaction ID: SD10.4152</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="226.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="600.00"/>		<b>Transaction ID: SD10.4160</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="600.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1826.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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

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

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

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

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

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

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

<b>1) SUBTOTALS</b> This Period This Page (optional).....	4098.53
<b>2) TOTALS</b> This Period (last page this line number only).....	11511.92
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	8500.00
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 13493.60	
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: Salary			Transaction ID: H4.6738	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

<b>B. Full Name (Last, First, Middle Initial)</b> Paychex			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 501 Wampanoag Trail			Allocated Activity or Event Year-To-Date 13711.47	
City East Providence	State RI	Zip Code 02915	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: payroll taxes			Transaction ID: H4.6745	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

<b>C. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 14299.57	
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: Salary			Transaction ID: H4.6739	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.87		892.20		1394.07

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 14887.67	
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: Salary			Transaction ID: H4.6740	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

<b>B. Full Name (Last, First, Middle Initial)</b> Paychex			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 501 Wampanoag Trail			Allocated Activity or Event Year-To-Date 15105.54	
City East Providence	State RI	Zip Code 02915	Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: payroll taxes			Transaction ID: H4.6746	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

<b>C. Full Name (Last, First, Middle Initial)</b> Paychex			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 501 Wampanoag Trail			Allocated Activity or Event Year-To-Date 15323.41	
City East Providence	State RI	Zip Code 02915	Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: payroll taxes			Transaction ID: H4.6747	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
368.58		655.26		1023.84

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 15911.51	
City Pawtucket	State RI	Zip Code 02860	Date MM / DD / YYYY 04 / 17 / 2009	
Purpose of Disbursement: Salary			Transaction ID: H4.6741	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

<b>B. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 16499.61	
City Pawtucket	State RI	Zip Code 02860	Date MM / DD / YYYY 04 / 17 / 2009	
Purpose of Disbursement: Salary			Transaction ID: H4.6742	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

<b>C. Full Name (Last, First, Middle Initial)</b> Paychex			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 501 Wampanoag Trail			Allocated Activity or Event Year-To-Date 16717.48	
City East Providence	State RI	Zip Code 02915	Date MM / DD / YYYY 04 / 17 / 2009	
Purpose of Disbursement: payroll taxes			Transaction ID: H4.6748	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.87		892.20		1394.07

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Paychex			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 501 Wampanoag Trail			Allocated Activity or Event Year-To-Date 16935.35		
City East Providence	State RI	Zip Code 02915	Date <input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: payroll taxes			Transaction ID: H4.6749		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

<b>B. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 17523.45		
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Salary			Transaction ID: H4.6743		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

<b>C. Full Name (Last, First, Middle Initial)</b> Lammis Vargas			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 37 Cato Ave.			Allocated Activity or Event Year-To-Date 18111.55		
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Salary			Transaction ID: H4.6744		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.72		376.38		588.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.87		892.20		1394.07

**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)**  
Paychex

Mailing Address  
501 Wampanoag Trail

City	State	Zip Code	001
East Providence	RI	02915	

Purpose of Disbursement:  
payroll taxes

Activity or Event Identifier:  
Administrative

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  
18329.42

Date  /  /   
**Transaction ID:** H4.6750

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

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

Mailing Address  
501 Wampanoag Trail

City	State	Zip Code	001
East Providence	RI	02915	

Purpose of Disbursement:  
payroll taxes

Activity or Event Identifier:  
Administrative

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  
18547.29

Date  /  /   
**Transaction ID:** H4.6751

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.43		139.44		217.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.86		278.88		435.74

**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
2031.05	3610.74	5641.79