

**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) 413 Knight Street
 Check if different than previously reported. (ACC) Warwick RI 02886

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00078196

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 01 2003 through 06 30 2003

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 Merrill C. Drew

Signature of Treasurer Electronically Filed by Merrill C. Drew Date 01 29 2004

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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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: ^M0¹ [:]0¹ ^Y200³ To: ^M0⁶ [:]3⁰ ^Y200³

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 200 ³		-2016.10
(b) Cash on Hand at Beginning of Reporting Period	-2016.10	
(c) Total Receipts (from Line 19)	64756.15	64756.15
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62740.05	62740.05
<hr/>		
7. Total Disbursements (from Line 31)	54647.57	54647.57
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6092.48	6092.48
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
<hr/>		
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Rhode Island Republican State Central Committee

Report Covering the Period: From: ^M01 ^D01 ^Y2003 To: ^M06 ^D30 ^Y2003

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)	10500.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10500.00	10500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	733.65	733.65
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	11233.65	11233.65
12. Transfers From Affiliated/Other Party Committees	45022.50	45022.50
13. All Loans Received	8500.00	8500.00
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	64756.15	64756.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64756.15	64756.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	9375.98	9375.98
(ii) Non-Federal Share.....	35271.59	35271.59
(b) Other Federal Operating Expenditures.....	10000.00	10000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	54647.57	54647.57
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 ActMty (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))..	54647.57	54647.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19375.98	19375.98

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	11233.65	11233.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11233.65	11233.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19375.98	19375.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19375.98	19375.98

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 23	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Peter Arnold		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 20 Grey's Point Road		Transaction ID: SA11A1.4413
City Charlestown	State RI	Zip Code 02813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self employed	Occupation	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Bruce Campbell		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 111 Plain Woods Road		Transaction ID: SA11A1.4415
City Eoster	State RI	Zip Code 02825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Lincoln Chafee		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 22 Beachwood Drive		Transaction ID: SA11A1.4416
City Warwick	State RI	Zip Code 02818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer United States Senate	Occupation United States Senator	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 23	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. John M. Harpootian		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 31 Lauren Lane		Transaction ID: SA11A1.4418
City West Warwick	State RI	Zip Code 02883
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Paster & Harpootian	Occupation Attorney	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kenneth E. Knox		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 42 Huntington Drive		Transaction ID: SA11A1.4420
City Rumford	State RI	Zip Code 02816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Provident Mutual Ins.	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Thomas Peartman, Esq.		Date of Receipt M / D / Y 02 / 14 / 2003
Mailing Address 750 East Avenue		Transaction ID: SA11A1.4448
City Providence	State RI	Zip Code 02940
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Thomas Peartman, Esq.	Occupation Attorney at Law	indiv. contrib. removed from unitemized
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 23	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. Nancy N. Richmond		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 5 B Quartz Drive		Transaction ID: SA11A1.4422
City Westerly	State RI	Zip Code 02891
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Joseph A. Russo		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 214B Mineral Spring Ave.		Transaction ID: SA11A1.4435
City Providence	State RI	Zip Code 02916
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Anchor Program		

Full Name (Last, First, Middle Initial) C. Lisa M. Sapsnsley		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 355 Blackstone Blvd.		Transaction ID: SA11A1.4424
City Providence	State RI	Zip Code 02908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation N/A	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Anchor contribution		

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 23	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Richard Singleton		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 10 Emmitt Lane Cumberland		Transaction ID: SA11A1.4427
City Cumberland	State RI	Zip Code 02864
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Group Benefit Ins.	Occupation	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Francis P. Sullivan		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 81 Old Providence Road		Transaction ID: SA11A1.4430
City Swansea	State MA	Zip Code 02771
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cameron Res. Mutual	Occupation	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Kevin Vigilante		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 8 Halsmith St.		Transaction ID: SA11A1.4433
City Rumford	State RI	Zip Code 02918
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation sel employed	Anchor contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	10500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 23		
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Forum for Senate Committee		Date of Receipt M / D / Y 02 / 26 / 2003
Mailing Address 2888 Harkney Hill Road		Transaction ID: SA11C.4412
City Coventry	State RI	Zip Code 02816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 733.65
Name of Employer	Occupation	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 733.65	

SUBTOTAL of Receipts This Page (optional)	▶	733.65
TOTAL This Period (last page this line number only)	▶	733.65

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 23	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Republican Nat Committee		Date of Receipt M / D / Y 01 / 20 / 2003
Mailing Address 310 First Street, SE		Transaction ID: SA12.4437
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45022.50
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 45022.50	

SUBTOTAL of Receipts This Page (optional)	▶	45022.50
TOTAL This Period (last page this line number only)	▶	45022.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 23	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input checked="" 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

Full Name (Last, First, Middle Initial) A. Carcieri for Governor		Date of Receipt M / D / Y 03 / 24 / 2003
Mailing Address P. O. Box 20415		Transaction ID: SA13.4439
City Cranston	State RI	Zip Code 02920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3500.00
Name of Employer	Occupation	loan/direct payment to FEC for penalty
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. Carcieri for Governor		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address P. O. Box 20415		Transaction ID: SA13.4441
City Cranston	State RI	Zip Code 02920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	loan/direct payment to FEC for penalty
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 8500.00	

SUBTOTAL of Receipts This Page (optional)	▶	8500.00
TOTAL This Period (last page this line number only)	▶	8500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 23

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

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

Full Name (Last, First, Middle Initial) A. F.E.C.		Transaction ID: SB21B.4447 Date of Disbursement 06 / 23 / 2003	
Mailing Address 999 East St, W		Amount of Each Disbursement this Period 10000.00	
City Washington	State DC	Zip Code 20483	Category/ Type
Purpose of Disbursement penalty for late filing		Candidate Name	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	10000.00

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 14 / 23 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

Transaction ID: SC/10.4439

LOAN SOURCE Full Name (Last, First, Middle Initial) Carciari 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:
03 rd 24 th 2003		% (apr)	<input type="checkbox"/> Yes <input 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)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15 / 23 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Rhode Island Republican State Central Committee

Transaction ID: SC/10.4441

LOAN SOURCE Full Name (Last, First, Middle Initial) Carciari 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:
06 th 10 th 2003		% (apr)	<input type="checkbox"/> Yes <input 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)	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)

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

FOR LINE NUMBER: (check only one)

9
 10

DEBTS AND OBLIGATIONS

Excluding Loans

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		Transaction ID: SD10.4144	
1500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	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		Transaction ID: SD1D.4148	
2500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2500.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Halsey Properties		Nature of Debt (Purpose): Rent Back Debt	
Mailing Address 1B Burnside Street			
City	State	ZIP Code	
Bristol	RI	02809	
Outstanding Balance Beginning This Period		Transaction ID: SD1D.4148	
1587.39			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1587.39	

1) SUBTOTALS This Period This Page (optional)	▶	5587.39
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS 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)

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

FOR LINE NUMBER: (check only one)

9
 10

DEBTS AND OBLIGATIONS

Excluding Loans

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	State	ZIP Code	
Alexandria	VA	22314	
Outstanding Balance Beginning This Period		Transaction ID: SD10.4150	
1000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	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	State	ZIP Code	
East Greenwich	RI	02818	
Outstanding Balance Beginning This Period		Transaction ID: SD1D.4152	
226.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	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	State	ZIP Code	
Providence	RI	02808	
Outstanding Balance Beginning This Period		Transaction ID: SD1D.4160	
600.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	600.00	

1) SUBTOTALS This Period This Page (optional)	▶	1826.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS 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)

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

DEBTS AND OBLIGATIONS

FOR LINE NUMBER: (check only one)

9
 10

Excluding Loans

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		Transaction ID: SD10.4154	
1198.53			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	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		Transaction ID: SD1D.4156	
2575.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	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		Transaction ID: SD1D.4158	
325.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	325.00	

1) SUBTOTALS This Period This Page (optional)	▶	4098.53
2) TOTALS This Period (last page this line number only)	▶	11511.92
3) TOTALS 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)	▶	

DISBURSEMENT SCHEDULE H4 (FEC Form 3X)
JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

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

A. Full Name (Last, First, Middle Initial) Advance Mailing 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 Event Year-To-Date -1217.61				
Mailing Address							
City	State	Zip Code	Category/Type				
Providence	RI	02903	D01				
Purpose/Event: direct mailing			Date MM / DD / YYYY 01 / 18 / 2003				
Description: direct mailing			Transaction ID: H4.4407				
FEDERAL SHARE		+	NON-FEDERAL SHARE		=	TOTAL AMOUNT	
-105.00			-395.00			-500.00	

B. Full Name (Last, First, Middle Initial) Choice One Communications			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 Event Year-To-Date -296.32				
Mailing Address 100 Chestnut St., Suite 800							
City	State	Zip Code	Category/Type				
Rochester	NY	14604	D01				
Purpose/Event: telephone			Date MM / DD / YYYY 01 / 18 / 2003				
Description: telephone			Transaction ID: H4.4401				
FEDERAL SHARE		+	NON-FEDERAL SHARE		=	TOTAL AMOUNT	
-48.92			-184.04			-232.96	

C. Full Name (Last, First, Middle Initial) OSI Collection Service, Inc.			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 Event Year-To-Date -63.36				
Mailing Address P. O. Box 6110							
City	State	Zip Code	Category/Type				
Westerville	OH	43086	D01				
Purpose/Event: uncleared check-returned			Date MM / DD / YYYY 01 / 18 / 2003				
Description: unclear check-returned			Transaction ID: H4.4399				
FEDERAL SHARE		+	NON-FEDERAL SHARE		=	TOTAL AMOUNT	
-13.31			-50.05			-63.36	

SUBTOTAL of Joint Federal and Non-Federal Activity This Page							
FEDERAL SHARE		+	NON-FEDERAL SHARE		=	TOTAL AMOUNT	
-187.23			-629.09			-796.32	
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and non-Federal share to 21(a)(ii))							
FEDERAL SHARE						TOTAL AMOUNT	
		NON-FEDERAL SHARE					
TOTAL This Period for the Non-Federal Share (used for line 31 of the detailed summary page)							

**DISBURSEMENT SCHEDULE H4 (FEC Form 3X)
JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE**

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

A. Full Name (Last, First, Middle Initial) DSI Collection Service, Inc.			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		
Mailing Address P. O. Box 811D			Event Year-To-Date -717.61		
City	State	Zip Code	001	Date MM / DD / YYYY 01 / 18 / 2003	
Westerville	OH	43086			
Purpose/Event: uncleared check-returned			Category/ Type	Transaction ID: H4.4408	
Description: uncleard check-returned					
FEDERAL SHARE		+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
-15.35			-57.85		-73.26

B. Full Name (Last, First, Middle Initial) Verizon			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		
Mailing Address PO Box 28007			Event Year-To-Date -844.35		
City	State	Zip Code	001	Date MM / DD / YYYY 01 / 18 / 2003	
Lehigh Valley	PA	18002			
Purpose/Event: telephone			Category/ Type	Transaction ID: H4.4403	
Description: telephone					
FEDERAL SHARE		+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
-73.08			-274.94		-348.03

C. Full Name (Last, First, Middle Initial) Verizon			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		
Mailing Address PO Box 28007			Event Year-To-Date -854.01		
City	State	Zip Code	001	Date MM / DD / YYYY 01 / 27 / 2003	
Lehigh Valley	PA	18002			
Purpose/Event: telephone			Category/ Type	Transaction ID: H4.4380	
Description: telephone					
FEDERAL SHARE		+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
78.36			287.24		363.60

SUBTOTAL of Joint Federal and Non-Federal Activity This Page					
FEDERAL SHARE		+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
-12.11			-45.58		-57.69
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and non-Federal share to 21(a)(ii))					
FEDERAL SHARE					TOTAL AMOUNT
			NON-FEDERAL SHARE		
TOTAL This Period for the Non-Federal Share (used for line 31 of the detailed summary page)					

DISBURSEMENT SCHEDULE H4 (FEC Form 3X)
JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

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

A. Full Name (Last, First, Middle Initial) Targeted Creative Comm Inc			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 Event Year-To-Date <p style="text-align: right;">44186.49</p>	
Mailing Address 1000 Duke St				
City	State	Zip Code	Category/ Type	
Alexandria	VA	22314		
Purpose/Event: Advertising-not for a federal candidate			Date M / N / Y C E Y Y Y	
Description: Advertising-not for a federal candidate			Date 0 2 / 0 3 / 2 0 0 3	
			Transaction ID: H4.4391	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
9458.50			35582.00	
			=	TOTAL AMOUNT
				45040.50

B. Full Name (Last, First, Middle Initial) Deborah Betbencourt			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 Event Year-To-Date <p style="text-align: right;">44343.99</p>	
Mailing Address PO Box 307				
City	State	Zip Code	Category/ Type	
Hope	RI	02831		
Purpose/Event: accounting			Date M / N / Y C E Y Y Y	
Description: accounting			Date 0 2 / 1 9 / 2 0 0 3	
			Transaction ID: H4.4392	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
33.07			124.43	
			=	TOTAL AMOUNT
				157.50

C. Full Name (Last, First, Middle Initial) Matthew Ulricksen			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 Event Year-To-Date <p style="text-align: right;">44552.57</p>	
Mailing Address 20 C Castle Rock Dr				
City	State	Zip Code	Category/ Type	
Charlestown	RI	02813		
Purpose/Event: reimbursement-general			Date M / N / Y C E Y Y Y	
Description: reimbursement-general			Date 0 2 / 1 9 / 2 0 0 3	
			Transaction ID: H4.4393	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
43.80			164.78	
			=	TOTAL AMOUNT
				208.58

SUBTOTAL of Joint Federal and Non-Federal Activity This Page				
FEDERAL SHARE		+	NON-FEDERAL SHARE	
9535.37			35871.21	
			=	TOTAL AMOUNT
				45406.58
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and non-Federal share to 21(a)(ii))				
FEDERAL SHARE		TOTAL AMOUNT		
		NON-FEDERAL SHARE		
		TOTAL AMOUNT		
TOTAL This Period for the Non-Federal Share (used for line 31 of the detailed summary page)				

DISBURSEMENT SCHEDULE H4 (FEC Form 3X)
JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

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

A. Full Name (Last, First, Middle Initial) Jonathan Wheeler			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 Event Year-To-Date 44803.57	
Mailing Address 643 East Avenue Unit 101				
City Warwick	State RI	Zip Code 02886	001	
Purpose/Event: postage			Category/ Type	
Description: postage			Date M / D / Y 03 / 19 / 2003	
			Transaction ID: H4.4394	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
10.71			40.29	
			=	TOTAL AMOUNT
				51.00

B. Full Name (Last, First, Middle Initial) Jonathan Wheeler			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 Event Year-To-Date 44827.57	
Mailing Address 643 East Avenue Unit 101				
City Warwick	State RI	Zip Code 02886	001	
Purpose/Event: reim.-postage			Category/ Type	
Description: reim.-postage			Date M / D / Y 03 / 19 / 2003	
			Transaction ID: H4.4395	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
5.04			18.96	
			=	TOTAL AMOUNT
				24.00

C. Full Name (Last, First, Middle Initial) First Fed. Savings Bank of Am.			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 Event Year-To-Date 44847.57	
Mailing Address P.O. Box 1509				
City Fall River	State MA	Zip Code 02722-1509	001	
Purpose/Event: bank charge			Category/ Type	
Description: bank charge			Date M / D / Y 06 / 13 / 2003	
			Transaction ID: H4.4398	
FEDERAL SHARE		+	NON-FEDERAL SHARE	
4.20			15.80	
			=	TOTAL AMOUNT
				20.00

SUBTOTAL of Joint Federal and Non-Federal Activity This Page				
FEDERAL SHARE		+	NON-FEDERAL SHARE	
19.95			75.05	
			=	TOTAL AMOUNT
				95.00
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and non-Federal share to 21(a)(ii))				
FEDERAL SHARE				TOTAL AMOUNT
8375.98				44647.57
		NON-FEDERAL SHARE		
				35271.59
TOTAL This Period for the Non-Federal Share (used for line 31 of the detailed summary page)				

Please note that there are no administrative costs. The party has not been billed yet for rent (utilities are included). When we pay, we will be paying out of a non-federal account. The party does not have any salary costs because the staff is strictly on a volunteer basis. And, we have not met the 25% federal election activity requirement. The Carcieri for Governor Campaign receipts are loans to the party and are reported as such in this report. The email address and fax number given in this report are my personal ones. The report could not be filed without one. The party does not have a fax number or email address yet. Therefore a new organizational is not needed.