

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) R.I. Republican State Central Comm.		2. FEC IDENTIFICATION NUMBER C-000418198
ADDRESS (number and street) Check if different than previously reported 15 BRIDGE Street		3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE Providence RI 02903		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding _____

(Type of Election; election on _____ in the State of _____)

Thirtieth day report following the General Election on _____

in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>March 28 1994</u> through <u>April 30 1994</u>		
6. (a) Cash on Hand January 1, 1994		\$ 696.45
(b) Cash on Hand at Beginning of Reporting Period	\$ 18,926.80	
(c) Total Receipts (from Line 19)	\$ 1700.61	\$ 57,332.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 18,927.41	\$ 58,028.70
7. Total Disbursements (from Line 30)	\$ 18,305.55	\$ 57,907.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 621.86	\$ 621.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 28,842.25	

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

Stephen B. Cuomo

Signature of Treasurer

Stephen B. Cuomo

Date

10/14/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

FEC FORM 3X

(revised 7/1993)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE R.I. Republican State Central Committee	REPORT COVERING PERIOD FROM 5-22-94 TO: 7-31-94	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	250.00	2477.00
ii. Unitemized	436.00	1515.00
iii. Total	686.00	3992.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		220.00
d. Total Contributions	686.00	4144.00
12. Transfers From Affiliated/Other Party Committees		1250.00
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	4.74	17.11
18. Transfers from Nonfederal Account for Joint Activity	829.87	4580.29
19. Total Receipts	1510.61	10369.33
20. Total Federal Receipts	810.74	16403.11
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4):		
i. Federal Share	4527.00	14,282.74
ii. Non-Federal Share	13,536.00	44,372.70
b. Other Federal Operating Expenditures	250.50	306.20
c. Total Operating Expenditures	18,313.50	59,061.64
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use Schedule F) ..		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds	-0-	-0-
29. Other Disbursements		
30. Total Disbursements	18,313.50	59,061.64
31. Total Federal Disbursements	17,752.00	55,074.14
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)/(from line 11d)	686.00	4144.00
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)/(subtract line 33 from 32)	686.00	4144.00
35. Total Federal Operating Expenditures	17,752.00	55,074.14
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures	17,066.00	50,930.14

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 116

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

0
1
2
3
4
5
6
7
8
9
0

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify): In-Law Pay	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Rhode Island Republican 56 Boston Avenue Providence, RI 02904	John J. the Governor Occupation: State Rep. Candidate Aggregate Year-to-Date > \$ 250	10/1/00	250.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number on v)

250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

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

2403930360

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Scarpello 50 Abingdon Avenue Providence, RI 02902	20-10-13 Pay	10/1/04	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only) 250.00

SCHEDULE D
 (Revised 3/80)

DEBTS AND OBLIGATIONS
 Excluding Loans

Page 1 of 3 for
 LINE NUMBER 402
 (Use separate schedules
 for each numbered line)

Name of Committee (in full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
R.I. Republican State Central Comm.				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor RI Republican State Central Comm. - STATE #con - 18 Bridge Street Prov, RI 02903	25,041. ⁷⁹	-0-	-0-	25,041. ⁷⁹
Nature of Debt (Purpose): allocated expenses				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Capital View Associates 400 Smith St. Providence, RI 02908	7,000. ⁰⁰	-0-	-0-	7,000. ⁰⁰
Nature of Debt (Purpose): disputed rent + utilities				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Republican National Committee 310 First Street, SE Washington, DC 20003	1,148. ⁰⁰	-0-	-0-	1,148. ⁰⁰
Nature of Debt (Purpose): disputed fundraising expenses				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Direct Mail Systems 801-2 28th Street, North St. Petersburg, FL 33716	4,376. ⁴³	-0-	-0-	4,376. ⁴³
Nature of Debt (Purpose): disputed direct mail				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Norma Willis 1191 North Road Jamestown, RI 02835	4,000. ⁰⁰	-0-	-0-	4,000. ⁰⁰
Nature of Debt (Purpose): back salary				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				41,566. ²²
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LDANS 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
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 21 of 3 for
LINE NUMBER 14
(Use separate scheduling
for each numbered line)

Name of Creditor (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
R.I. Republican State Central Comm				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Bell Atlantic P.O. Box 120250 Stamford, CT 06412	834.72	-0-	834.72	-0-
Nature of Debt (Purpose): Telephone				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Hickory Properties 18 Bismarck Street Bristol, CT 06010	1557.31	-0-	-0-	1557.31
Nature of Debt (Purpose): Rent - utilities				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor: RESA 511 Union Street Nashville, TN 37219	616.00	-0-	-0-	616.00
Nature of Debt (Purpose): Advance				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor: EMAYNS Business Products 200 N. Blossom Street E. Providence, RI 02914	3142.00	250.00	250.00	3142.00
Nature of Debt (Purpose): Credit				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Financing Mart Charles - Conn. Street Providence, RI 02903	297.18	-0-	-0-	297.18
Nature of Debt (Purpose): Finance				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Pizza Delivery Service Section Bldg Wigwag, RI 02886	174.79	0	-0-	174.79
Nature of Debt (Purpose): Food				
1) SUBTOTALS This Period This Page (optional)				4516.00
2) TOTAL This Period (last page this line 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)				

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
R.I. Republican State Central Comm				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Stephen J. Annino 180 Richmond Drive Wickford, RI 02895	10,100 ⁰⁰	1800 ⁰⁰	10,900 ⁰⁰	1500 ⁰⁰
Nature of Debt (Purpose): Goods Payment				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Richard Scarpellino 56 Robert Avenue W Pawtucket, RI 02868	1,000	(1,000)	-0-	-0-
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				1500 ⁰⁰
2) TOTAL This Period (last page this line only)				48,512 ²⁵
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				48,512 ²⁵

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE
R-I Republican State Central Committee

TOTAL AMOUNT TRANSFERRED

NAME OF ACCOUNT
R-I Republican State Central Comm - State Act

DATE OF RECEIPT
11/24/17

\$ **322.50**

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	322.50			
ii) Direct Fundraising (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				

NAME OF ACCOUNT
RI Republican State Central Comm - State Acct.

DATE OF RECEIPT
9/26/17

\$ **500.00**

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	500.00			
ii) Direct Fundraising (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS

SUBTOTAL THIS PAGE

TOTAL THIS PERIOD

822.50 **822.50**

10
20
30
40
50
60
70
80
90

NAME OF COMMITTEE					
R. I. Republican State Central Committee					
A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Providence Court Providence City Hall Providence, RI 02902	Parkings	12/31/94 4/1/94	15.00 80.00	3.75 20.00	11.25 60.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Stephen J. Annino 107 Richmond Terrace Warwick, RI 02889	payroll	9/1/94	82,203.33	20,052.21	62,151.12
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 10, 20, 33, 73 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Psychon, Fran 100 Pleasant St E. Providence, RI 02914	tuition	4/1/94	1462.00 4410.00	112.16	3507.84
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 5, 23, 32 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Adesso 101 Channing Street Providence, RI 02903	rent	4/1/94	1000.00	250.00	750.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 106 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Field Atlantic 475 E. 120th St Shelton, CT 06412	phone	4/3/94	824.22	206.18	618.04
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 84 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Imperial Business Products 200 N. Main Street E. Providence, RI 02917	copies	4/1/94	250.00	62.50	187.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 26, 37, 44 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			13411.02	3725.16	12275.86
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 2' a.i and non Fed. share to 21 a.ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 3' of the detailed summary page)					

NAME OF COMMITTEE					
R. I. Republican State Central Committee					
A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Town Office 100 Spring Street Cromwell, CT 06110	meeting	4/1/97	116.30	29.20	87.10
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 46.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Carmello's 27 Broad Street Providence, RI 02903	meeting	4/1/97	85.47	21.92	63.55
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 225.07 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
John A. Nichols, Jr. 4 Surrey Road Bloomfield, CT 06034	expense - Reim.	4/3/97 11/1/97	150.00 150.00	33.30 33.30	116.70 116.70
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 375.07 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Town Head Office Town Head Office Providence, RI 02903	bill	4/1/97	7.50	1.50	6.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1674.38 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Conyers Home 444 Inne Road Windsor, CT 06095	meeting	4/1/97	136.31	34.50	101.81
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 26.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Staples Providence Office Providence, RI 02903	supplies	4/1/97 4/1/97	27.28 26.00	17.00 6.00	10.28 20.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 267.06 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			3707.31	850.97	2856.34
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21.a.i and non-Fed. share to 21.a.ii) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) ...					

DISBURSEMENT SCHEDULE H4
(effective 1/1/91)

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE 3	OF 2
FOR LINE 21a	

NAME OF COMMITTEE					
R. I. Republican State Central Committee					
A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Old Stone Room 2000 Stone Street Providence, RI 02903	loan interest	11/1/77 9/1/77	86.78 32.02	22.25 20.00	64.53 12.02
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3 6 8 9 72		DIRECT CANDIDATE SUPPORT		
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Eastern Bank 29 Collins Street Providence, RI 02903	purchase	11/1/77	116.00	29.00	87.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3 11 8 1 72		DIRECT CANDIDATE SUPPORT		
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
100 Pentac 330 Summer Street Providence, RI 02910	renting	11/1/77	198.73	49.21	149.52
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3 1 7 4 7 3		DIRECT CANDIDATE SUPPORT		
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
100 Pentac 330 Summer Street Providence, RI 02910	phone	11/1/77	267.59	67.00	200.59
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3 1 7 4 7 3		DIRECT CANDIDATE SUPPORT		
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
100 Pentac Insurance 660 Reservoir Avenue Providence, RI 02909	insurance	1/1/77	257.00	67.25	189.75
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3 2 7 7		DIRECT CANDIDATE SUPPORT		
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT	EVENT YEAR-TO-DATE: 3		DIRECT CANDIDATE SUPPORT		
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			1,073.12	253.22	764.05
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a; and non-Fed. share to 21 a k)			18,115.52	7,331.00	13,586.52
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

The \$1,400 in back pay that was previously reported on Schedule D as being owed to Richard M. Scarpellino of 56 Audubon Avenue, North Providence, RI 02908, has been forgiven by him.

On Schedules A and E, the Federal portion of this administrative expense (25%), or \$350, has been listed as an in-kind contribution and expense.

Therefore, on Schedule D, the amounts payable for him is now being listed as zero and will not be listed on further reports.

240339303689

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered DATE OF RECEIPT

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PKY

10/17/94

PREPARED

DATE PREPARED

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