

# 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) 3351 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 07 01 2007 through 07 31 2007

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 11 05 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Rhode Island Republican State Central Committee

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>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>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 120132.49 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 0                                 | 7 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 54113.46                |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 0.00                    | 19178.10                          |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 54113.46                | 139310.59                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 800.00                  | 85997.13                          |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 53313.46                | 53313.46                          |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 0.00                          | 0.00                              |
| (i) Itemized (use Schedule A) .....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....  | 0.00                          | 0.00                              |
| (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) .....    | 0.00                          | 0.00                              |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 5393.16                           |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 12368.76                          |
| 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                          | 1416.18                           |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 1416.18                           |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 0.00                          | 19178.10                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 0.00                          | 17761.92                          |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

| <b>II. DISBURSEMENTS</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 21. Operating Expenditures:   |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |                                       |   |
| (i) Federal Share.....  | 288.00                                | 4985.87                                   |
| (ii) Non-Federal Share.....   | 512.00                                | 8863.75                                   |
| (b) Other Federal Operating Expenditures.....   | 0.00                                  | 946.16                                    |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 800.00                                | 14795.78                                  |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                                  | 62000.00                                  |
| 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                                  | 9201.35                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               | 0.00                                  | 9201.35                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        | 800.00                                | 85997.13                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 288.00                                | 77133.38                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 0.00                          | 0.00                              |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 0.00                          | 0.00                              |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 288.00                        | 5932.03                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 12368.76                          |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 288.00                        | -6436.73                          |

**SCHEDULE C (FEC Form 3X)**

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

**LOANS**

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

Transaction ID: SC/10.4439

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Carcieri for Governor

Election:

- Primary
- General
- 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: MM/03 DD/24 YY/2003  
 Date Due: \_\_\_\_\_ Interest Rate: \_\_\_\_\_ % (apr)  
 Secured:  Yes  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: _____ |

|   |                |
|---|----------------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | <b>3500.00</b> |
| <b>TOTALS</b> 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

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

Transaction ID: SC/10.4441

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Carcieri for Governor

Election:

- Primary
- General
- 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: MM/YY 06/2003      Date Due: \_\_\_\_\_      Interest Rate: \_\_\_\_\_ % (apr)      Secured:  Yes  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: _____ |

|   |         |
|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 5000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | 8500.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 8 / 11   |
|   | FOR LINE NUMBER: (check only one)<br><input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 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<br>Campaign Solutions | Nature of Debt (Purpose):<br>Direct Mail Back Debt |
| Mailing Address 228 South Washington Street   |  |
| City State ZIP Code<br>Alexandria VA 22314  |  |

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

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

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

|  |   |
|--|---|
| <b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Halsey Properties | Nature of Debt (Purpose):<br>Rent Back Debt |
| Mailing Address 18 Burnside Street   |   |
| City State ZIP Code<br>Bristol RI 02809  |   |

|  |                                  |  |
|--|----------------------------------|--|
| Outstanding Balance Beginning This Period<br>1587.39 | <b>Transaction ID: SD10.4148</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00      | Outstanding Balance at Close of This Period<br>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) TOTALS 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.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>JLM Consulting | Nature of Debt (Purpose):<br>Travel Back Debt |
| Mailing Address Info Requested  |   |
| City State ZIP Code<br>Alexandria VA 22314  |   |

|  |                                  |  |
|--|----------------------------------|--|
| Outstanding Balance Beginning This Period<br>1000.00 | <b>Transaction ID: SD10.4150</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00      | Outstanding Balance at Close of This Period<br>1000.00 |

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

|   |                                  |   |
|---|----------------------------------|---|
| Outstanding Balance Beginning This Period<br>226.00 | <b>Transaction ID: SD10.4152</b> |   |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00      | Outstanding Balance at Close of This Period<br>226.00 |

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

|   |                                  |   |
|---|----------------------------------|---|
| Outstanding Balance Beginning This Period<br>600.00 | <b>Transaction ID: SD10.4160</b> |   |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00      | Outstanding Balance at Close of This Period<br>600.00 |

|  |                |
|--|----------------|
| <b>1) SUBTOTALS</b> This Period This Page (optional).....                                      | <b>1826.00</b> |
| <b>2) TOTALS</b> This Period (last page this line number only).....                            |                |
| <b>3) TOTALS 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.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Providence Marriot | Nature of Debt (Purpose):<br>Event Exp Election 2000 |
| Mailing Address Orms Street   |  |
| City State ZIP Code<br>Providence RI 02903  |  |

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

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

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

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

|   |                                  |   |
|---|----------------------------------|---|
| Outstanding Balance Beginning This Period<br>325.00 | <b>Transaction ID: SD10.4158</b> |   |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00      | Outstanding Balance at Close of This Period<br>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) TOTALS 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 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)  
Robert S. Morris

Mailing Address  
72 Sagamore Road

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Cranston | RI    | 02920    |

001  
Category/  
Type

Purpose of Disbursement:  
Rent

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

13849.62

Date 07 / 05 / 2007

Transaction ID: H4.6278

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 288.00        |   | 512.00           |   | 800.00       |

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

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 288.00        |   | 512.00           |   | 800.00       |

**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 |
|---------------|---|------------------|---|--------------|
| 288.00        |   | 512.00           |   | 800.00       |