

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
Massachusetts Republican State Congressional Committee

ADDRESS (number and street) 85 Merrimac St.
Suite 400
 Check if different than previously reported. (ACC)
Boston MA 02114

2. **FEC IDENTIFICATION NUMBER** C00042622
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 09 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brent Anderson

Signature of Treasurer Electronically Filed by Brent Anderson Date 12 30 1899

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		77412.05
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	341799.68									
(c) Total Receipts (from Line 19)	255407.00	2418433.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	597206.68	2495845.80								
7. Total Disbursements (from Line 31)	186109.68	2084748.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	411097.00	411097.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	197750.00	1364421.50
(ii) Unitemized	335.00	57010.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	198085.00	1421432.38
(b) Political Party Committees	0.00	55.00
(c) Other Political Committees (such as PACs)	12500.00	49922.37
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	210585.00	1471409.75
12. Transfers From Affiliated/Other Party Committees	44822.00	947024.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	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))	255407.00	2418433.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	255407.00	2418433.75

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	123362.79	866897.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	123362.79	866897.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	243000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	677026.52
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	62746.89	297824.73
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	62746.89	297824.73
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	186109.68	2084748.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	186109.68	2084748.80

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)	210585.00	1471409.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	210585.00	1471409.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	123362.79	866897.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	123362.79	866897.55

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Jesse Baker

Mailing Address 8 Marlborough Street

City State Zip Code
Boston MA 02116

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: 00920.C185748

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Timothy Barrows

Mailing Address 18 Wedgemere Ave

City State Zip Code
Winchester MA 01890

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

Name of Employer Matrix Partners Occupation Venture Capital

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2010

Transaction ID: 00920.C185749

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
Timothy Barrows

Mailing Address 18 Wedgemere Ave

City State Zip Code
Winchester MA 01890

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

Name of Employer Matrix Partners Occupation Venture Capital

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2010

Transaction ID: 01016.C186078

Amount of Each Receipt this Period
-5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Joseph Bonasera
Mailing Address 80 N Border Rd
City Winchester State MA Zip Code 01890
FEC ID number of contributing federal political committee. **C**
Name of Employer Summit Financial Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 09 / 30 / 2010
Transaction ID: 01016.C186027
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Michael Brait
Mailing Address 226 Maple St.
City Boston State MA Zip Code 02132
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Self employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 09 / 29 / 2010
Transaction ID: 01016.C186020
Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
Michael Brait
Mailing Address 226 Maple St.
City Boston State MA Zip Code 02132
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Self employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ -5000.00
Date of Receipt 09 / 29 / 2010
Transaction ID: 01016.C186026
Amount of Each Receipt this Period -5000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Robert Brait

Mailing Address 181 Hillcrest Rd

City State Zip Code
Marshfield MA 02050

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

Name of Employer Self Employed Occupation Self employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 09 / 29 / 2010
Transaction ID: 01016.C186021
Amount of Each Receipt this Period: 15000.00

B.

Full Name (Last, First, Middle Initial)
Robert Brait

Mailing Address 181 Hillcrest Rd

City State Zip Code
Marshfield MA 02050

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

Name of Employer Self Employed Occupation Self employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 29 / 2010
Transaction ID: 01016.C186023
Amount of Each Receipt this Period: -5000.00

C.

Full Name (Last, First, Middle Initial)
Stephen Brait

Mailing Address 506 Plain St

City State Zip Code
Marshfield MA 02050

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

Name of Employer Self Employed Occupation Self employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 29 / 2010
Transaction ID: 00920.C185744
Amount of Each Receipt this Period: -5000.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Stephen Brait

Mailing Address 506 Plain St

City State Zip Code
Marshfield MA 02050

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

Name of Employer
Self Employed

Occupation
Self employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: 01016.C186024

Amount of Each Receipt this Period
15000.00

B.

Full Name (Last, First, Middle Initial)
Kathy Campanella

Mailing Address 46 River Road

City State Zip Code
Weston MA 02493

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2010

Transaction ID: 01016.C186085

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Brenda Carlin

Mailing Address Po Box 1174

City State Zip Code
Boca Grande FL 33921

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

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: 01016.C186082

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **35000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 47
	(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)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Brenda Carlin		Date of Receipt
	Mailing Address Po Box 1174		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Boca Grande	FL	33921
	FEC ID number of contributing federal political committee. C		Transaction ID: 01016.C186084
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> -5000.00
		<input type="text"/> -5000.00	

B.	Full Name (Last, First, Middle Initial) James Carlin		Date of Receipt
	Mailing Address c/o Twin Ledges PO BOX 1174		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Boca Grande	FL	11174
	FEC ID number of contributing federal political committee. C		Transaction ID: 01016.C186081
Name of Employer Carlin Consolidated, Inc.		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> -5000.00
		<input type="text"/> -5000.00	

C.	Full Name (Last, First, Middle Initial) James Carlin		Date of Receipt
	Mailing Address c/o Twin Ledges PO BOX 1174		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Boca Grande	FL	11174
	FEC ID number of contributing federal political committee. C		Transaction ID: 01016.C186089
Name of Employer Carlin Consolidated, Inc.		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15000.00
		<input type="text"/> 10000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Joseph Carlucci
Mailing Address 5 Penryn Way
City State Zip Code
Rockport MA 01966
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt MM / DD / YYYY
09 / 30 / 2010
Transaction ID: 00920.C185666
Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Virginia Dacier
Mailing Address 92 Woodland St.
City State Zip Code
Sherborn MA 01770
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ -5000.00
Date of Receipt MM / DD / YYYY
09 / 10 / 2010
Transaction ID: 00920.C185658
Amount of Each Receipt this Period -5000.00

C. Full Name (Last, First, Middle Initial)
Virginia Dacier
Mailing Address 92 Woodland St.
City State Zip Code
Sherborn MA 01770
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt MM / DD / YYYY
09 / 10 / 2010
Transaction ID: 00920.C185771
Amount of Each Receipt this Period 10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Douglas Drane

Mailing Address 3 Hedge Ln

City Austin State TX Zip Code 78746

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

Name of Employer Self Employed Occupation Entrepreneur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 00920.C185772
Amount of Each Receipt this Period 10000.00

B.

Full Name (Last, First, Middle Initial)
John Fowler

Mailing Address One Post Office Sq. STE. 3500

City Boston State MA Zip Code 02109

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 01016.C185958
Amount of Each Receipt this Period 5000.00

C.

Full Name (Last, First, Middle Initial)
William Koch

Mailing Address 974 South Ocean Blvd

City Palm Beach State FL Zip Code 33480

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

Name of Employer The Oxbow Group Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 24 / 2010
Transaction ID: 00920.C185652
Amount of Each Receipt this Period -5000.00

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
William Koch

Mailing Address 974 South Ocean Blvd

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation
The Oxbow Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2010

Transaction ID: 01016.C185959

Amount of Each Receipt this Period
15000.00

B.

Full Name (Last, First, Middle Initial)
Donna Marriott

Mailing Address Marriott Drive

City State Zip Code
Washington DC 20058

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

Name of Employer Occupation
At Home Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
-5000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: 01016.C185785

Amount of Each Receipt this Period
-5000.00

C.

Full Name (Last, First, Middle Initial)
Donna Marriott

Mailing Address Marriott Drive

City State Zip Code
Washington DC 20058

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

Name of Employer Occupation
At Home Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: 01016.C186087

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **25000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
James McManus

Mailing Address 88 Chestnut St

City State Zip Code
Weston MA 02493

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

Name of Employer Self Employed Occupation Commercial Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2010

Transaction ID: 00920.C185763

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Alfred Molinari

Mailing Address PO Box 468

City State Zip Code
Southborough MA 01772

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

Name of Employer Data Translation Inc Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ -5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 00920.C185762

Amount of Each Receipt this Period
-5000.00

C.

Full Name (Last, First, Middle Initial)
Alfred Molinari

Mailing Address PO Box 468

City State Zip Code
Southborough MA 01772

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

Name of Employer Data Translation Inc Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 01016.C185981

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Paul Moore

Mailing Address 51 Baker Place

City State Zip Code
Newton MA 02462

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

Name of Employer Dwane Moris Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2010

Transaction ID: 01016.C185780

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Rodger Nordblom

Mailing Address 200 Barnes Hill Rd.

City State Zip Code
Concord MA 01742

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

Name of Employer Nordblom Company Occupation Real Estate Develop.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: 01016.C186141

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Gail Radley

Mailing Address 255 Country Club Road

City State Zip Code
Dedham MA 02026

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

Name of Employer At Home Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: 01016.C185961

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **16000.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Robert Roell

Mailing Address 9 Stimson Ave

City Lexington State MA Zip Code 02421

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2010
Transaction ID: 01016.C185962
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Ann Romney

Mailing Address 19 Greensbrook Way

City Belmont State MA Zip Code 02478

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

Name of Employer Homemaker Occupation At home

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 25 / 2010
Transaction ID: 01016.C185964
Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
Ann Romney

Mailing Address 19 Greensbrook Way

City Belmont State MA Zip Code 02478

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

Name of Employer Homemaker Occupation At home

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 25 / 2010
Transaction ID: 01016.C185965
Amount of Each Receipt this Period -5000.00

SUBTOTAL of Receipts This Page (optional) ► 10250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial) Willard Romney		Date of Receipt MM / DD / YYYY 09 / 25 / 2010
Mailing Address 19 Greensbrook Way		Transaction ID: 01016.C185889
City Belmont	State MA	Zip Code 02478
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15000.00
Name of Employer Self Employed	Occupation Self employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B.

Full Name (Last, First, Middle Initial) Willard Romney		Date of Receipt MM / DD / YYYY 09 / 25 / 2010
Mailing Address 19 Greensbrook Way		Transaction ID: 01016.C186038
City Belmont	State MA	Zip Code 02478
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -5000.00
Name of Employer Self Employed	Occupation Self employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

C.

Full Name (Last, First, Middle Initial) Ronald Skates		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 4 Boardman Avenue		Transaction ID: 01016.C186039
City Manchester	State MA	Zip Code 01944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Maria Stata

Mailing Address 6 Miller Hill Rd

City Dover State MA Zip Code 02030

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

Name of Employer Information Requested Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: 00920.C185760

Amount of Each Receipt this Period -5000.00

B.

Full Name (Last, First, Middle Initial)
Maria Stata

Mailing Address 6 Miller Hill Rd

City Dover State MA Zip Code 02030

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

Name of Employer Information Requested Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: 01016.C186037

Amount of Each Receipt this Period 10000.00

C.

Full Name (Last, First, Middle Initial)
Ray Stata

Mailing Address PO Box 9106

City Norwood State MA Zip Code 02062

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

Name of Employer Analog Devices Occupation Chairman and Founder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: 00920.C185759

Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) ▶ **7500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Peter Voss		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address One Charles Street South Apt 7-H		Transaction ID: 01016.C185972		
	City Boston	State MA	Zip Code 02116	Amount of Each Receipt this Period -4000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -4000.00			

B.	Full Name (Last, First, Middle Initial) Peter Voss		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address One Charles Street South Apt 7-H		Transaction ID: 01016.C186018		
	City Boston	State MA	Zip Code 02116	Amount of Each Receipt this Period 10000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00			

C.	Full Name (Last, First, Middle Initial) David Weinstein		Date of Receipt MM / DD / YYYY 09 / 25 / 2010		
	Mailing Address 158 Cotton Street		Transaction ID: 00920.C185561		
	City Newton	State MA	Zip Code 02458	Amount of Each Receipt this Period 10000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Employed	Occupation Lawyer			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00			

SUBTOTAL of Receipts This Page (optional)	▶	16000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Jeff A. Leerink

Mailing Address 304 Commonwealth Ave #3

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: 00920.C185654

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
Jeff A. Leerink

Mailing Address 304 Commonwealth Ave #3

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: 01016.C185786

Amount of Each Receipt this Period
-5000.00

C.

Full Name (Last, First, Middle Initial)
Abbott Laboratories PAC

Mailing Address Maria Cahill
100 Abbott Park Road

City State Zip Code
North Chicago IL 60064

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

Name of Employer Occupation
PAC
FEC ID: C00040279

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: 01016.C186046

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	197750.00

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

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

FOR LINE NUMBER: PAGE 21 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Edward Wendell
Mailing Address 187 Randolph Ave
City Milton State MA Zip Code 02186
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 09 / 28 / 2010
Transaction ID: 01016.C186036
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Diane Wilsey
Mailing Address 2590 Jackson St
City San Francisco State CA Zip Code 94115
FEC ID number of contributing federal political committee. **C**
Name of Employer A. Wilsey Properties Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00
Date of Receipt 09 / 07 / 2010
Transaction ID: 01016.C185954
Amount of Each Receipt this Period 4500.00

C. Full Name (Last, First, Middle Initial)
Cozen OConnor PAC
Mailing Address 1900 Market St.
City Philadelphia State PA Zip Code 19103
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 09 / 10 / 2010
Transaction ID: 01016.C185987
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 7500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 47	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) NAHU PAC		Date of Receipt	
	Mailing Address 2000 N 14th st. Suite 450		M M / D D / Y Y Y Y 09 / 24 / 2010	
	City	State	Zip Code	Transaction ID: 00920.C185648
	Arlington	VA	22201	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		5000.00	
Name of Employer PAC		Occupation FEC ID # C00283135		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	12500.00

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

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

FOR LINE NUMBER: PAGE 23 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Political Committee Occupation
FEC ID: C00003418

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
112854.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2010
Transaction ID: 01016.C186345
Amount of Each Receipt this Period
3148.00

B. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Political Committee Occupation
FEC ID: C00003418

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
99332.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010
Transaction ID: 01017.C186670
Amount of Each Receipt this Period
31300.00

C. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Political Committee Occupation
FEC ID: C00003418

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
104769.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2010
Transaction ID: 01017.C186671
Amount of Each Receipt this Period
5437.00

SUBTOTAL of Receipts This Page (optional) ► **39885.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 24 / 47	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial) Republican National Committee		Date of Receipt
Mailing Address 310 First Street SE		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: 01017.C186672
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="4937.00"/>
Name of Employer Political Committee	Occupation	
	FEC ID: C00003418	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="109706.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4937.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="44822.00"/>

**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 25 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Republican National Committee</p> <p>Mailing Address 310 First Street SE DO NOT MAIL</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement SEE LINE 12: IN-KIND TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01016.E12508</p> <p>Date of Disbursement 09 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 3148.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Republican National Committee</p> <p>Mailing Address 310 First Street SE DO NOT MAIL</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement SEE LINE 12 IN-KIND TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01017.E12509</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 5437.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Republican National Committee</p> <p>Mailing Address 310 First Street SE DO NOT MAIL</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement SEE LINE 12 - IN-KIND TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01017.E12510</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 4937.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13522.00

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

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 26 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tim Buckley	Transaction ID: 01017.E12572 Date of Disbursement MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 55 W Broadway #8	Amount of Each Disbursement this Period 232.05
	City Boston State MA Zip Code 02127	
	Purpose of Disbursement REIMBURSEMENT FOR PHONE PARKING TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tim Buckley	Transaction ID: 01017.E12573 Date of Disbursement MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 55 W Broadway #8	Amount of Each Disbursement this Period 100.00
	City Boston State MA Zip Code 02127	
	Purpose of Disbursement REIMBURSEMENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ryan Coleman	Transaction ID: 01017.E12562 Date of Disbursement MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 9 Stearms Street	Amount of Each Disbursement this Period 100.00
	City Swampscott State MA Zip Code 01907	
	Purpose of Disbursement REIMBURSEMENT FOR PHONE PARKING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	432.05
TOTAL This Period (last page this line number only)	▶	

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 27 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Ryan Coleman	Transaction ID: 01017.E12563
	Mailing Address 9 Stearms Street	Date of Disbursement MM / DD / YYYY 09 / 16 / 2010
	City State Zip Code Swampscott MA 01907	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement REIMBURSEMENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 01017.E12553
	Mailing Address 74 Green Street	Date of Disbursement MM / DD / YYYY 09 / 23 / 2010
	City State Zip Code Stoneham MA 02180	Amount of Each Disbursement this Period 159.38
	Purpose of Disbursement REIMBURSEMENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Tara Esfahanian	Transaction ID: 01017.E12570
	Mailing Address 177 Upham St.	Date of Disbursement MM / DD / YYYY 09 / 02 / 2010
	City State Zip Code Melrose MA 02176	Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement FUNDRAISING CONSULTANT FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	4259.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tara Esfahanian	Transaction ID: 01017.E12571 Date of Disbursement 09 / 02 / 2010
	Mailing Address 177 Upham St.	Amount of Each Disbursement this Period 2610.00
	City Melrose State MA Zip Code 02176	
	Purpose of Disbursement FUNDRAISING CONSULTING FEE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01017.E12535 Date of Disbursement 09 / 02 / 2010
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 222.31
	City Boston State MA Zip Code 02131	
	Purpose of Disbursement REIMBURSEMENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01017.E12536 Date of Disbursement 09 / 30 / 2010
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 448.16
	City Boston State MA Zip Code 02131	
	Purpose of Disbursement REIMBURSEMENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3280.47
TOTAL This Period (last page this line number only)	

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 29 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Kirsten Hughes Mailing Address 72 Davis Street City Quincy State MA Zip Code 02170 Purpose of Disbursement 5228 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12538 Date of Disbursement 09 / 23 / 2010 Amount of Each Disbursement this Period 182.87
B.	Full Name (Last, First, Middle Initial) Nick Lehr Mailing Address 38 Saunders Rd. City Boston State MA Zip Code 02134 Purpose of Disbursement REIMBURSEMENT FOR PHONE TRAVEL PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12554 Date of Disbursement 09 / 09 / 2010 Amount of Each Disbursement this Period 315.16
C.	Full Name (Last, First, Middle Initial) Nick Lehr Mailing Address 38 Saunders Rd. City Boston State MA Zip Code 02134 Purpose of Disbursement REIMBURSEMENT FOR PARKING TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12555 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) ▶	598.03
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Kristen M Lepore	Transaction ID: 01017.E12540
	Mailing Address 4 Buttonwood lane	Date of Disbursement 09 / 23 / 2010
	City Danvers State MA Zip Code 01923	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kristen M Lepore	Transaction ID: 01017.E12541
	Mailing Address 4 Buttonwood lane	Date of Disbursement 09 / 23 / 2010
	City Danvers State MA Zip Code 01923	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01017.E12547
	Mailing Address 22 Slayton Road	Date of Disbursement 09 / 02 / 2010
	City Melrose State MA Zip Code 02176	Amount of Each Disbursement this Period 4240.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	14240.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01017.E12548
	Mailing Address 22 Slayton Road	Date of Disbursement 09 / 02 / 2010
	City Melrose State MA Zip Code 02176	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01017.E12549
	Mailing Address 22 Slayton Road	Date of Disbursement 09 / 30 / 2010
	City Melrose State MA Zip Code 02176	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01017.E12550
	Mailing Address 22 Slayton Road	Date of Disbursement 09 / 30 / 2010
	City Melrose State MA Zip Code 02176	Amount of Each Disbursement this Period 4177.00
	Purpose of Disbursement CONSULTING NON-FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	9177.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Magan Munson Mailing Address 209 bunker hill st Apt 1 City Boston State MA Zip Code 02129 Purpose of Disbursement REIMBURSEMENT FOR TRAVEL PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12542 Date of Disbursement 09 / 02 / 2010 Amount of Each Disbursement this Period 104.05
B.	Full Name (Last, First, Middle Initial) Magan Munson Mailing Address 209 bunker hill st Apt 1 City Boston State MA Zip Code 02129 Purpose of Disbursement REIMBURSEMET FOR PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12543 Date of Disbursement 09 / 15 / 2010 Amount of Each Disbursement this Period 132.43
C.	Full Name (Last, First, Middle Initial) Magan Munson Mailing Address 209 bunker hill st Apt 1 City Boston State MA Zip Code 02129 Purpose of Disbursement REIMBURSEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12544 Date of Disbursement 09 / 23 / 2010 Amount of Each Disbursement this Period 227.15

SUBTOTAL of Disbursements This Page (optional) ▶	463.63
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Jennifer Nassour</p> <p>Mailing Address 49 Chelsea St., Unit C1-307</p> <p>City Boston State MA Zip Code 02129</p> <p>Purpose of Disbursement REIMBURSEMENT FOR PHONE TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01017.E12533</p> <p>Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 824.87</p>
<p>B. Full Name (Last, First, Middle Initial) Jennifer Nassour</p> <p>Mailing Address 49 Chelsea St., Unit C1-307</p> <p>City Boston State MA Zip Code 02129</p> <p>Purpose of Disbursement REIMBURSEMENT FOR PHONE TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01017.E12534</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 222.31</p>
<p>C. Full Name (Last, First, Middle Initial) Lakeside Office Park Quannapowitt 591</p> <p>Mailing Address 591 North Avenue</p> <p>City Wakefield State MA Zip Code 01880</p> <p>Purpose of Disbursement FIELD OFFICE RENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01017.E12561</p> <p>Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2547.18

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

**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 34 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Michael Yacobian	Transaction ID: 01017.E12551 Date of Disbursement 09 / 09 / 2010
	Mailing Address Tabor Academy Young Republicans 66 Spring Street	Amount of Each Disbursement this Period 175.00
	City Marion State MA Zip Code 02738	
	Purpose of Disbursement REIMBURSEMENT FOR PHONE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Yacobian	Transaction ID: 01017.E12552 Date of Disbursement 09 / 16 / 2010
	Mailing Address Tabor Academy Young Republicans 66 Spring Street	Amount of Each Disbursement this Period 175.00
	City Marion State MA Zip Code 02738	
	Purpose of Disbursement REIMBURSEMENT FOR PHONE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) 8 Elm Street LLC	Transaction ID: 01017.E12514 Date of Disbursement 09 / 16 / 2010
	Mailing Address 352 Sprague St.	Amount of Each Disbursement this Period 975.00
	City Dedham State MA Zip Code 02026	
	Purpose of Disbursement FIELD OFFICE RENT Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1325.00
TOTAL This Period (last page this line number only)	▶	

**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 35 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) 9 Elm Street LLC	Transaction ID: 01017.E12512
	Mailing Address 352 Sprague St.	Date of Disbursement 09 / 23 / 2010
	City Dedham State MA Zip Code 02026	Amount of Each Disbursement this Period 975.00
	Purpose of Disbursement FIELD OFFICE RENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Barrows Insurance	Transaction ID: 01017.E12515
	Mailing Address 215 North Main Street	Date of Disbursement 09 / 02 / 2010
	City Mansfield State MA Zip Code 02048	Amount of Each Disbursement this Period 1560.00
	Purpose of Disbursement LIABILITY INSURANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts	Transaction ID: 01017.E12516
	Mailing Address Landmark Center 401 Park Drive	Date of Disbursement 09 / 23 / 2010
	City Boston State MA Zip Code 02215	Amount of Each Disbursement this Period 6848.49
	Purpose of Disbursement HEALTH INSURANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	9383.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Boston Marriott Newton	Transaction ID: 01017.E12545 Date of Disbursement 09 / 23 / 2010
	Mailing Address 2345 Commonwealth Ave.	Amount of Each Disbursement this Period 1201.83
	City Newton State MA Zip Code 02466	
	Purpose of Disbursement STATE COMMITTEE MEETING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bowditch & Dewey	Transaction ID: 01017.E12517 Date of Disbursement 09 / 23 / 2010
	Mailing Address 311 Main St. PO Box 15156	Amount of Each Disbursement this Period 1950.00
	City Worcester State MA Zip Code 01615	
	Purpose of Disbursement LEGAL CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: 01017.E12521 Date of Disbursement 09 / 23 / 2010
	Mailing Address PO Box 196	Amount of Each Disbursement this Period 114.90
	City Newark State NJ Zip Code 07101	
	Purpose of Disbursement CABLE BILL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3266.73
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) DirecTV	Transaction ID: 01017.E12523
	Mailing Address PO Box 60036	Date of Disbursement 09 / 16 / 2010
	City Los Angeles State CA Zip Code 90060	Amount of Each Disbursement this Period 14.68
	Purpose of Disbursement SATELITE TV	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Exeter Group, Inc	Transaction ID: 01017.E12524
	Mailing Address 1 Canal Park	Date of Disbursement 09 / 09 / 2010
	City Cambridge State MA Zip Code 02141	Amount of Each Disbursement this Period 6264.00
	Purpose of Disbursement IT CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 01017.E12528
	Mailing Address 7300 Hudson Blvd. Ste	Date of Disbursement 09 / 09 / 2010
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period 10103.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	16381.68
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 01017.E12530 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="440.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 01017.E12531 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="76.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Full Impact Production	Transaction ID: 01017.E12532 Date of Disbursement
	Mailing Address 97 Betts Rd.	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Belmont State MA Zip Code 02478	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - NON FEA	<input type="text" value="16000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="16517.32"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Keswick Consulting Mailing Address 231 Victory Road City Quincy State MA Zip Code 02171 Purpose of Disbursement CONSULTING NON-FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12546 Date of Disbursement 09 / 23 / 2010 Amount of Each Disbursement this Period 3000.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems Mailing Address P.O. Box 7247-0322 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement COPIER LEASE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12539 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 782.83 Category/Type
C.	Full Name (Last, First, Middle Initial) M&L Mailing Address 29 Franklin St. 2nd Floor City Wrentham State MA Zip Code 02093 Purpose of Disbursement FIELD OFFICE RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12580 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 300.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4082.83
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Mr. Philip Miatkowski Mailing Address 485 Foster St. City North Andover State MA Zip Code 01845 Purpose of Disbursement REIMBURSEMENT FOR PARKING TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12560 Date of Disbursement 09 / 30 / 2010 Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Osgood Bradley Building Corp Mailing Address 18 Grafton St. City Worcester State MA Zip Code 01604 Purpose of Disbursement FIELD OFFICE RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12556 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114 Purpose of Disbursement OFFICE RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12557 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 555.17

SUBTOTAL of Disbursements This Page (optional) ▶	1255.17
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) SCR & Associates, LLC	Transaction ID: 01017.E12565
	Mailing Address 4 Leblanc Dr	Date of Disbursement 09 / 23 / 2010
	City Danvers State MA Zip Code 01923	Amount of Each Disbursement this Period 6000.00
	Purpose of Disbursement FUNDRAISING CONSULTING FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sprint/Nextel	Transaction ID: 01017.E12569
	Mailing Address PO Box 17990	Date of Disbursement 09 / 23 / 2010
	City Denver State CO Zip Code 80217	Amount of Each Disbursement this Period 83.73
	Purpose of Disbursement CELL PHONE BILL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Top of the Hub	Transaction ID: 01017.E12576
	Mailing Address 800 Boylston St.	Date of Disbursement 09 / 02 / 2010
	City Boston State MA Zip Code 02199	Amount of Each Disbursement this Period 858.13
	Purpose of Disbursement FUNDRAISING EVENT FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6941.86
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: 01017.E12574 Date of Disbursement
	Mailing Address Fort Point Station Dorchester Avenue	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Boston State MA Zip Code 02215	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="185.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: 01017.E12575 Date of Disbursement
	Mailing Address Fort Point Station Dorchester Avenue	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Boston State MA Zip Code 02215	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 01017.E12577 Date of Disbursement
	Mailing Address PO Box 5029	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Wallingford State CT Zip Code 06492	Amount of Each Disbursement this Period
	Purpose of Disbursement PHONE BILL	<input type="text" value="226.49"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="911.49"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 44 / 47

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 01017.E12578
	Mailing Address PO Box 5029	Date of Disbursement 09 / 30 / 2010
	City Wallingford State CT Zip Code 06492	Amount of Each Disbursement this Period 344.97
	Purpose of Disbursement PHONE BILL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 01017.E12579
	Mailing Address PO Box 5029	Date of Disbursement 09 / 09 / 2010
	City Wallingford State CT Zip Code 06492	Amount of Each Disbursement this Period 2865.90
	Purpose of Disbursement PHONE SERVICE BILL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Country First PAC	Transaction ID: 01017.E12522
	Mailing Address 228 S. Washington St. Suite 115	Date of Disbursement 09 / 30 / 2010
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 545.10
	Purpose of Disbursement SEN MCCAIN ACCOMODATIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3755.97
TOTAL This Period (last page this line number only)	123260.28

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Philip Miatkowski	Transaction ID: 01017.E12558
	Mailing Address 485 Foster St.	Date of Disbursement MM / DD / YYYY 09 / 23 / 2010
	City North Andover State MA Zip Code 01845	Amount of Each Disbursement this Period 650.00
	Purpose of Disbursement FIELD PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Philip Miatkowski	Transaction ID: 01017.E12559
	Mailing Address 485 Foster St.	Date of Disbursement MM / DD / YYYY 09 / 23 / 2010
	City North Andover State MA Zip Code 01845	Amount of Each Disbursement this Period 650.00
	Purpose of Disbursement FIELD PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 01017.E12518
	Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Date of Disbursement MM / DD / YYYY 09 / 09 / 2010
	City Hanover State MA Zip Code 02339	Amount of Each Disbursement this Period 45.00
	Purpose of Disbursement PARTY RELATED WEBSITE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1345.00
TOTAL This Period (last page this line number only)	▶	

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 46 / 47

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 01017.E12519 Date of Disbursement 09 / 30 / 2010
	Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 2073.44
	City Hanover State MA Zip Code 02339	
	Purpose of Disbursement PARTY RELATED WEBSITE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Campaign Homebank LLC	Transaction ID: 01017.E12520 Date of Disbursement 09 / 30 / 2010
	Mailing Address One Walnut St. Suite 4	Amount of Each Disbursement this Period 47328.45
	City Boston State MA Zip Code 02108	
	Purpose of Disbursement VICTORY PHONE BANK - PARTY ONLY	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Semcasting Inc	Transaction ID: 01017.E12566 Date of Disbursement 09 / 02 / 2010
	Mailing Address 300 Brickstone Square	Amount of Each Disbursement this Period 4000.00
	City Andover State MA Zip Code 01810	
	Purpose of Disbursement Voter ID Targeting PARTY RELATED	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	53401.89
TOTAL This Period (last page this line number only)	

**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 47 / 47

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

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Semcasting Inc Mailing Address 300 Brickstone Square City Andover State MA Zip Code 01810 Purpose of Disbursement Voter ID Targeting Party Only Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12567 Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	Amount of Each Disbursement this Period 4000.00
B. Full Name (Last, First, Middle Initial) Semcasting Inc Mailing Address 300 Brickstone Square City Andover State MA Zip Code 01810 Purpose of Disbursement Voter ID Targeting Party Only Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01017.E12568 Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ►

8000.00

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

62746.89