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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Rhode Island Republican State Central Committee 3351 Post Road ADDRESS (number and street) Check if different than previously RI 02886 Warwick reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00078196 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 03 0 1 2008 03 3 1 2008 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Marc Tondreau Type or Print Name of Treasurer Marc Tondreau Electronically Filed by 04 20 2008 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Rhode Island Republican State Central Committee [®] D " D 03 0 1 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 49715.73 2008 January 1 (b) Cash on Hand at 47926.53 Begining of Reporting Period 872.91 2672.45 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 48799.44 52388.18 6(a) and 6(c) for Column B) 1342.94 4931.68 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 47456.50 47456.50 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 20011.92 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Rhode Island Republican State Central Committee

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)	0.00	285.00	
	(ii) Unitemized	0.00	0.00	
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	285.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	285.00	
2.	Transfers From Affiliated/Other Party Committees	872.91	1527.05	
3.	All Loans Received	0.00	0.00	
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00	
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00	
	to Federal candidates and Other Political Committees	0.00	0.00	
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	
8.	Transfers from Non-Federal and Levin Funds			
	(a) Non-Federal Account (from Schedule H3)	0.00	860.40	
	(b) Levin Funds (from Schedule H5)	0.00	0.00	
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	860.40	
۱9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	872.91	2672.45	
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	872.91	1812.05	

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 483.46 1775.40 (i) Federal Share..... 859.48 3156.28 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 1342.94 4931.68 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 0.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 1342.94 4931.68 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 483.46 1775.40 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	0.00	285.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	285.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	483.46	1775.40
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	483.46	1775.40

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 6 / 12	
		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a	
Ar or	ny information copied from such Reports and Star for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	Rhode Island Republican State Central (Committee	9	
	Full Name (Last, First, Middle Initial) RI Republican State Central Comm			Date of Receipt
	Mailing Address 3351 Post Rd.			03 21 2008
	City	State	Zip Code	Transaction ID: SA12.6385
	Warwick	RI	02886	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0078196	872.91
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 951.05	

SUBTOTAL of Receipts This Page (optional)	•	872.91
TOTAL This Period (last page this line number only)	•	872.91

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 7 / 12 FOR LINE 13 OF FORM 3X

LOANS		Detailed Summary Pag	
NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee	ee	Too	2000 tion ID: \$C(10, 1420
LOAN SOURCE Full Name (Last, First, Middle Initial Carcieri for Governor Mailing Address P. O. Box 20415	al)	Irar	saction ID: SC/10.4439 Election: Primary General Other (specify) ▼
City Cranston State	RI ZIP Code	02920	
	nulative Payment To Da		nce Outstanding at Close of This Period
3500.00		0.00	3500.00
TERMS Date Incurred 0 3 2 4 2 0 0 3	Date Due	Interest	Rate Secured: % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial)	N	Name of Employer	
Mailing Address		Occupation Amount	
City State ZI	P Code C	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	١	Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code C	Amount Guaranteed Dutstanding:	
Full Name (Last, First, Middle Initial)	١	Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code	Amount Guaranteed Dutstanding:	
Full Name (Last, First, Middle Initial)	١	lame of Employer	
Mailing Address		Occupation	
City State ZI	P Code C	Amount Guaranteed Dutstanding:	
SUBTOTALS This Period This Page (optional)		<u>•</u>	3500.00
TOTALS This Period (last page in this line only)			.00
Carry outstanding balance only to LINE 3, Schedule D, fo	r this line. If no Schedu	le D, carry forward to app	propriate line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 8 / 12 FOR LINE 13 OF FORM 3X

	Detailed Sun	nmary Page	
NAME OF COMMITTEE (In Full)		L	
Rhode Island Republican State Central Committee		Transacti	ion ID: SC/10.4441
LOAN SOURCE Full Name (Last, First, Middle Initial)			ction:
Carcieri for Governor			Primary General
Mailing Address P. O. Box 20415			Other (specify) ▼
City Cranston State RI ZIP C	Code 02920		
Original Amount of Loan Cumulative Payment	To Date	Balance O	outstanding at Close of This Period
5000.00	0.00		5000.00
TERMS Date Incurred Date Due		Interest Rate	Secured:
0 6 D D 2 0 0 3 Y Y Y			% (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Emplo	yer	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Emplo	yer	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Emplo	iyer	
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed		
Olly State ZIF Gode	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Emplo	yer	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)		<u> </u>	5000.00
TOTALS This Period (last page in this line only)	(-	8500.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sc	chedule D, carry forv	ward to appropri	ate line of Summary.

PAGE 9 / 12 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Back Debt Campaign Solutions Mailing Address 228 South Washington Street City State ZIP Code Alexandria VA 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4144 1500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Timothy Costa Back Pay Mailing Address 84 Enfield Avenue 7IP Code City State Providence 02908 RI Outstanding Balance Beginning This Period Transaction ID: SD10.4146 2500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Hasley Properties Rent Back Debt Mailing Address 18 Burnside Street ZIP Code City State Bristol 02809 RΙ Outstanding Balance Beginning This Period Transaction ID: SD10.4148 1587.39 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1587.39 5587.39 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 10 / 12 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): JLM Consulting Travel Back Debt Mailing Address Info Requested City ZIP Code Alexandria VA 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4150 1000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Event Exp Back Debt Kentish Guards Mailing Address Main Street 7IP Code City State East Greenwich 02818 RIOutstanding Balance Beginning This Period Transaction ID: SD10.4152 226.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 226.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Event Exp Photography Back Debt Richard Kizarian Mailing Address 337 Sastram Street ZIP Code City State Providence 02908 RI Outstanding Balance Beginning This Period Transaction ID: SD10.4160 600.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 600.00 1826.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 11 / 12 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Providence Marriot Event Exp Election 2000 Mailing Address Orms Street City ZIP Code Providence RI02903 Outstanding Balance Beginning This Period Transaction ID: SD10.4154 1198.53 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1198.53 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Hon Joan Quick Back Pay Mailing Address 16-G Mullen Hill Road ZIP Code City State Little Compton 02837 RIOutstanding Balance Beginning This Period Transaction ID: SD10.4156 2575.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2575.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Ralph Stuart Band Event Exp Back Debt Mailing Address 3 Regency Plaza ZIP Code City State Providence 02903 RΙ Outstanding Balance Beginning This Period Transaction ID: SD10.4158 325.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 325.00 4098.53 1) SUBTOTALS This Period This Page (optional)..... 11511.92 2) TOTALS This Period (last page this line number only)..... 8500.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

20011.92

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	1	2 / 1	2	
FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In F	ull)			,
Rhode Island Republica	n State Central	Committee		
A =	r Kathalan I oo o			Transit Allegated A. C. C.
A. Full Name (Last, First Cox Communication				Type of Allocated Activity:
				Administrative Fundraising Exempt
Mailing Address P. O. Box 39	Q I P N	Murphy Hwy.		☐ Voter Drive ☐ Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Newark	NJ	02893	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursemen		02000	Category/	3710.83
Internet			Type	
Activity or Event Identifie Administrative	er:			Date 0 3 0 3 2 0 0 8 Transaction ID: H4.6381
FEDERAL	L SHARE	+ NONFEDER	AL SHARE	= TOTAL AMOUNT
	43.95		78.14	122.09
B. Full Name (Last, First Cox Communication				Type of Allocated Activity: X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P. O. Box 39	9 J. P. N	Murphy Hwy.		
City	State	Zip Code		Public Comm (ref to party only) by PAC
Newark	NJ	02893	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursemer Telephone	nt:		Category/ Type	4031.68
Activity or Event Identifie Administrative	er:			Date 0 3 0 3 7 2 0 0 8 Transaction ID: H4.6382
FEDERA	L SHARE	+ NONFEDER	AL SHARE	= TOTAL AMOUNT
	115.51		205.34	320.85
C. Full Name (Last, First Robert S. Morris	t, Middle Initial)			Type of Allocated Activity: X Administrative Fundraising Exempt
Mailing Address				
72 Sagamore Road				UVoter Drive ☐ Direct Candidate Support
City	State	Zip Code	-	Public Comm (ref to party only) by PAC
Cranston	RI	02920	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursemer Rent	nt:		Category/	4931.68
Activity or Event Identifie	er.		Туре	M M / D D / Y Y Y Y
Administrative				Date 0.3 2.8 2.008
FEDERA	I SHARE	+ NONFEDER	AI SHARE	Transaction ID: H4.6383 = TOTAL AMOUNT
TEDETIA	1 1 1 1 1	T NON EDEN	1 1 1 1 1	
	324.00		576.00	900.00
SUBTOTAL of Allocated Fed	deral and NonFede	eral Activity This Page		
FEDERAI	L SHARE	+ NONFEDER	AL SHARE	= TOTAL AMOUNT
	483.46		859.48	1342.94
, ,	-	ly)(Federal share to 21(a)(i) a		
FEDERA		NONFEDE	RAL SHARE	TOTAL AMOUNT
	483.46		859.48	1342.94