06/23/2011 17:15

Image# 11931731913

# **FORM 3X**

FE6AN026

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

_		For C	Other Than An	Authorize	ed Committ	ee		Office Use	Only
1.	NAME OF COMMITTEE (in full)		FEC MAILING LAE YPE OR PRINT		cample:If typing er the lines	g, type			
L	Rhode Island Republican Sta	ate Cent	tral Committee	1 1 1 1					
		1 1							
AD	DRESS (number and street)	180	00 Post Road						
	Check if different	Sui	ite 17-I			1 1 1 1		1 1 1 1	
L	than previously reported. (ACC)	L Wa	arwick 				LRI LL	028	86
2.	FEC IDENTIFICATION NUM	IBER	<b>_</b>	CITY 🛕		9	STATE A	ZI	PCODE A
	C00078196			3. IS THIS REPORT		NEW (N) <b>OR</b>		AMENDED (A)	
4.	TYPE OF REPORT (Choose One)		n) Monthly Report Due On:	Feb 20 (M2	2)	May 20 (M5)	Au	ug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:  April 15 Quarterly Report(Q1) July 15 Quarterly Report(Q2) October 15			Mar 20 (M3	3)	Jun 20 (M6)	Se	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
				Apr 20 (M4	)	Jul 20 (M7)	0	ct 20 (M10)	Jan 31 (YE)
		(c)	(c) 12-Day		Primary (12P)		Genera	ıl (12G)	Runoff (12R)
			PRE-Election Report for the		Convention (	(12C)	Specia	(12G)	_
	Quarterly Report(C January 31 Quarterly Report(Y		E	Election on					the state of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	n	(d) 30-Day Post -Elect Report for the		General (300	G)	Runoff		Special (30S)
	Termination Report (TER)	t	•	Election on					the state of
5.	Covering Period 1	i [	23 201	0	through	12	3 1	2010	
	ertify that I have examined this pe or Print Name of Treasurer		and to the best of n	ny knowledge	and belief it is	true, correct a	and complete	Э.	
ı yı	pe of Fillit Name of Treasurer								
Sig	gnature of Treasurer Electro	nically F	Filed by Marc To	ndreau		D	ate 0	6 23	2011
NC	DTE : Submission of false, error	neous, (	or incomplete infor	nation may s	ubject the pers	on signing this	s Report to t	he penalties of	2 U.S.C 437g.
	Office Use				_				FORM 3X 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Rep	ort Covering the Period: From:	23 2010	To: M M M D D D Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a	) Cash on Hand January 1 2010 <sup>Y Y Y</sup>		46687.93
(b	Cash on Hand at Begining of Reporting Period	64564.25	
(c	Total Receipts (from Line 19)	0.00	65844.63
(d	l) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	64564.25	112532.56
'. To	otal Disbursements (from Line 31)	1609.61	49577.92
	ash on Hand at Close of		
	eporting Period ubtract Line 7 from Line 6(d))	62954.64	62954.64
). De	ebts and Obligations owed TO		
	e committee (Itemize all on chedule C and/or Schedule D)	0.00	
the	ebts and Obligations owed BY e committee (Itemize all on chedule C and/or Schedule D)	20011.92	
	This Committee has qualified as a multicandic	late committee. (see FEC FORM 1M)	
	F	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) Page 3

Write or Type Committee Name

Rhode Island Republican State Central Committee

м м 1 1 23 м°м 12 3 1 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 1000.00 (i) Itemized (use Schedule A) ...... 0.00 405.00 (ii) Unitemized ..... (iii) TOTAL (add 0.00 1405.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 1000.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 0.00 2405.00 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 58000.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 9.47 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 5430.16 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 5430.16 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 0.00 65844.63 12, 13, 14, 15, 16, 17, and 18(c)) ......

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20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

0.00

60414.47

## DETAILED SUMMARY PAGE

of Disbursements

FEC. Form 3X (Rev. 02/2003) Page 4

FEC Form 3X (Rev. 02/2003)	or biobardements	Page 4		
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:	Total Tillo Fellou	Calcinal Teal to Bate		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	0.00	15398.38		
()	0.00	07400 00		
(ii) Non-Federal Share	0.00	27422.68		
(b) Other Federal Operating  Expenditures	909.61	3831.86		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii) and (b))	909.61	46652.92		
Transfers to Affiliated/Other Party				
Committees	700.00	2925.00		
Federal Candidates/Committeesand Other Political Committees	0.00	0.00		
4. Independent Expenditure	0.00	0.00		
(use Schedule E)	0.00	0.00		
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00		
(use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
i i				
7. Loans Made	0.00	0.00		
(a) Individuals/Persons Other	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(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		
(432 235 25(4), (5), 4 (5))				
9. Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C 431(20))				
(a) Shared Federal Election Activity				
(from Schedule H6)	0.00			
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
31. Total Disbursements (add Lines 21(c), 22,	1609.61	49577.92		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10.601	43077.92		
32. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	1609.61	22155.24		

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

	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	2405.00		
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	2405.00		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	909.61	19230.24		
87.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	9.47		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	909.61	19220.77		

FE6AN026

## Image# 11931731918

State:

A.

District:

**SCHEDULE B (FEC Form 3X)** FOR LINE NUMBER: PAGE 6/12 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 22 23 26 27 28a 28b 28c 29 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) Rhode Island Republican State Central Committee Full Name (Last, First, Middle Initial) Transaction ID: SB21B.7419 Spada Media Date of Disbursement 10 2010 Mailing Address PO Box 540 City State Zip Code Amount of Each Disbursement this Period Barrington RI 02806 709.61 Purpose of Disbursement Event expense 003 Candidate Name Category/ Type 2010 Office Sought: Disbursement For: House Senate Primary X General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	7	09.61
TOTAL This Period (last page this line number only)	<b>—</b>	7	09.61

## Image# 11931731919

A.

_	0ED.II E D /EEO E								
5(	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 7/12					
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl)	y one) X 22 23 24 25 26 28a 28b 28c 29 30b					
	y Information copied from such Reports and State for commercial purposes, other than using the nan								
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
$\backslash$	Rhode Island Republican State Central Co	ommittee							
	Full Name (Last, First, Middle Initial)			Transaction ID: SB22.7420					
	Rhode Island Republican State Central Co	ommittee		Date of Disbursement					
	Mailing Address 1800 Post Road Suite 17-I			12 M / D 1 3 / Y 2 0 1 0 Y					
	City Warwick	State Zip Code RI 02886		Amount of Each Disbursement this Period					
	Purpose of Disbursement	Γ	003	700.00					
	Candidate Name R. I. REPUBLICAN STATE CENTRAL CO		Category/ Type						
	Senate President	sement For: Primary General Other (specify) ▼							
	State: RI District:								

SUBTOTAL of Disbursements This Page (optional)	•		 	700.00	
TOTAL This Period (last page this line number only)	<u> </u>			700.00	

## SCHEDULE C (FEC Form 3X)

## L

Use separate schedule(s)

PAGE 8 / 12 FOR LINE 13 OF FORM 3X

LOANS		Detailed S	ategory of the Summary Page	TOTT LINE 13	OF TOTAIN 3X	
NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Cor	nmittee		Transac	etion ID: SC/10.4	1439	
LOAN SOURCE Full Name (Last, First, Midd Carcieri for Governor	lle Initial)			ection: Primary General		
Mailing Address P. O. Box 20415			<b>▼</b>			
City Cranston	State RI ZIP Code	e 02920				
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			Outstanding at Clo	se of This Period	
3500.00		0.00			3500.00	
TERMS Date Incurred	Date Due		Interest Rate	9	Secured:	
03 D D Y Y Y Y 2003			0.0000	% (apr)	Yes X No	
List All Endorsers or Guarantors (if any) to Loar	n Source					
Full Name (Last, First, Middle Initial)		Name of Emp	ployer			
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:			0 0	
Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
Full Name (Last, First, Middle Initial)		Name of Emp				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
Full Name (Last, First, Middle Initial)		Name of Emp	ployer			
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optional) .					3500.00	
TOTALS This Period (last page in this line only)			. •			
Carry outstanding balance only to LINE 3, Schedu	le D, for this line. If no Scher	dule D, carry fo	orward to approp	riate line of Summ	ary.	

## SCHEDULE C (FEC Form 3X)

## L

Use separate schedule(s)

PAGE 9/12 FOR LINE 13 OF FORM 3X

LOANS			category of the Summary Page	TOTT EINE 13 OF TOTTIVI 3X	
NAME OF COMMITTEE (In Full)					
Rhode Island Republican State Central Co			Transac	tion ID: SC/10.4441	
LOAN SOURCE Full Name (Last, First, Mid Carcieri for Governor	dle Initial)		Ele	ection: Primary General	
Mailing Address P. O. Box 20415		Other (specify)			
City Cranston	State RI ZIP Cod	e 02920			
Original Amount of Loan	Cumulative Payment To	Date	Balance (	Outstanding at Close of This Period	
5000.00		0.00		5000.00	
TERMS Date Incurred	Date Due		Interest Rate	e Secured:	
0 6 1 0 2 0 0 3 Y Y			0.0000	% (apr) Yes X	
List All Endorsers or Guarantors (if any) to Loa	n Source				
Full Name (Last, First, Middle Initial)	000.00	Name of Em	ployer		
Mailing Address		Occupation			
City	ZID Code	Amount Guaranteed	1 1 1		
City State	ZIP Code	Outstanding			
Full Name (Last, First, Middle Initial)		Name of Em	ployer		
Mailing Address		Occupation			
		Amount		1 1 1 1 1 1 1	
City State	ZIP Code	Guaranteed Outstanding			
Full Name (Last, First, Middle Initial)		Name of Em	ployer		
Mailing Address		Occupation			
		Amount		* * * * * * *	
City State	ZIP Code	Guaranteed Outstanding			
Full Name (Last, First, Middle Initial)		Name of Em	ployer		
Mailing Address		Occupation			
		Amount		0 0 0 0 0 0	
City State	ZIP Code	Guaranteed Outstanding			
SUBTOTALS This Period This Page (optional)			•	5000.00	
TOTALS This Period (last page in this line only)			. •	8500.00	
Carry outstanding balance only to LINE 3, Schedu	ule D, for this line. If no Sche	dule D, carry f	orward to appropr	riate line of Summary.	

### 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): 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 Amount Incurred This Period Outstanding Balance at Close of 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 RI 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 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): 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)

### Image# 11931731924 PAGE 12 / 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): Event Exp Election 2000 Providence Marriot Mailing Address Orms Street City State 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

0.00		325.00
1) SUBTOTALS This Period This Page (optional)	<b>•</b>	4098.53
2) TOTALS This Period (last page this line number only)	<b>&gt;</b>	11511.92
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<b>&gt;</b>	8500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<b>&gt;</b>	20011.92

Payment This Period

ZIP Code

02903

Transaction ID: SD10.4158

Outstanding Balance at Close of This Period

City

Providence

Mailing Address 3 Regency Plaza

Outstanding Balance Beginning This Period

Amount Incurred This Period

State

325.00

RI