

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 Street, 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 03 01 2006 through 03 31 2006

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 Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 05 15 2009

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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		90494.34
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	140790.65									
(c) Total Receipts (from Line 19)	139848.44	533257.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	280639.09	623752.08								
7. Total Disbursements (from Line 31)	177400.30	520513.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	103238.79	103238.79								
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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	73700.00	388921.00
(i) Itemized (use Schedule A)	39959.00	97446.99
(ii) Unitemized	113659.00	486367.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	25000.00	45250.00
(c) Other Political Committees (such as PACs)	138659.00	531617.99
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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)	1189.44	1639.75
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))	139848.44	533257.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	139848.44	533257.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	144135.86	411525.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	144135.86	411525.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	10000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	33264.44	98987.76
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	33264.44	98987.76
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	177400.30	520513.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	177400.30	520513.29

DETAILED SUMMARY PAGE
of Disbursements

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)	138659.00	531617.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	138659.00	531617.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	144135.86	411525.53
37. Offsets to Operating Expenditures (from Line 15, page 3)	1189.44	1639.75
38. Net Operating Expenditures (subtract Line 37 from Line 36)	142946.42	409885.78

Form/Schedule : **F3XA**

Transaction ID :

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED A
CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTI
RED TO BE REPORTED ON SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent
a letter within 30 days asking for employer-occupation if one was not provided in order to meet best
efforts policy.

**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 7 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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) Anheuser Busch PAC		Date of Receipt
	Mailing Address Michael Roche 1401 I Street NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2006
	City Washington	State DC	Zip Code 20005
	FEC ID number of contributing federal political committee. C		Transaction ID: 60320.C156003
	Amount of Each Receipt this Period		<input type="text"/> 5000.00
Name of Employer PAC		Occupation FEC #: C00034488	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	

B.	Full Name (Last, First, Middle Initial) AstraZeneca PAC		Date of Receipt
	Mailing Address Geoff Gallo 1800 Concord Pike		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2006
	City Wilmington	State DE	Zip Code 19850
	FEC ID number of contributing federal political committee. C		Transaction ID: 60410.C157536
	Amount of Each Receipt this Period		<input type="text"/> 5000.00
Name of Employer PAC		Occupation FEC ID: C00279455	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	

C.	Full Name (Last, First, Middle Initial) Comcast Corporation PAC		Date of Receipt
	Mailing Address 1500 Market Street 33rd Floor - East Tower		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2006
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Transaction ID: 60410.C157259
	Amount of Each Receipt this Period		<input type="text"/> 5000.00
Name of Employer PAC		Occupation FEC #: C000248716	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 15000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 54
(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)
Massachusetts Mutual PAC

Mailing Address Hugh Barrett
1295 State Street

City State Zip Code
Springfield MA 01111

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

Name of Employer Occupation
PAC PAC
FEC #: CC00118943

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 60320.C156856

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
WMX- Waste Management PAC

Mailing Address David Tooley
601 Pennsylvania Ave

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation
PAC- C00119008 PAC

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 60320.C156744

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	25000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 54
(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)
Marie Antolick

Mailing Address P.O. Box 2185

City State Zip Code
Edgartown MA 02539

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 ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2006

Transaction ID: 60410.C157289

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Butler

Mailing Address 30 Julio Dr.
Apt. 245

City State Zip Code
Shrewsbury MA 01545

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2006

Transaction ID: 60306.C155360

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
David Conlin

Mailing Address 171 Willow Rd.
DO NOT CALL

City State Zip Code
Nahant MA 01908

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

Name of Employer Edwards & Angell, LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 60320.C156772

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 / 54
(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)
Martin Crane

Mailing Address 6 Fulling Mill Lane

City Hingham State MA Zip Code 02043

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

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 17 / 2006
Transaction ID: 60320.C156955
Amount of Each Receipt this Period 5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
David Croll

Mailing Address 52 Essex Rd.
DO NOT MAIL

City Newton State MA Zip Code 02467

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

Name of Employer MC Venture Partners Occupation Venture Capitalist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 15 / 2006
Transaction ID: 60320.C156768
Amount of Each Receipt this Period 10000.00
Receipt

C. Full Name (Last, First, Middle Initial)
John Davis

Mailing Address 101 Woodsley Road

City Longmeadow State MA Zip Code 01106

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

Name of Employer Ventry Industries Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 15 / 2006
Transaction ID: 60320.C156764
Amount of Each Receipt this Period 10000.00
Receipt

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 11 / 54

(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 Davis

Mailing Address PO Box 15709

City State Zip Code
Springfield MA 01115

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 6

Transaction ID: 60320.C155712

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

David Ferrari

Mailing Address 7 Sassamon Rd

City State Zip Code
Natick MA 01760

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

Name of Employer Argus Management Occupation CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 6

Transaction ID: 60320.C155868

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Charles Fuller

Mailing Address 33 High Ridge Road

City State Zip Code
Boxford MA 01921

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

Name of Employer Fraen Corp Occupation Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60320.C155622

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

950.00

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 12 / 54
(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)
Thomas Futter

Mailing Address 10 Ward Ave.

City Northampton State MA Zip Code 01060

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2006

Transaction ID: 60410.C157368

Amount of Each Receipt this Period 300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Bruce Herzfelder

Mailing Address 438 Jerusalem Road

City Cohasset State MA Zip Code 02025

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

Name of Employer I-Group Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 07 / 2006

Transaction ID: 60320.C155786

Amount of Each Receipt this Period 10000.00

Receipt

C.

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

Mailing Address 131 Commonwealth Ave.

City Boston State MA Zip Code 02116

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

Name of Employer Humphrey Enterprises Occupation Businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 22 / 2006

Transaction ID: 60410.C157094

Amount of Each Receipt this Period 10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 20300.00

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 / 54
(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)
Martin Keane

Mailing Address PO Box 459

City Norfolk State MA Zip Code 02056

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

Name of Employer Martin A. Keane, Md Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2006

Transaction ID: 60320.C155604

Amount of Each Receipt this Period 250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Andrew Lane

Mailing Address 132 South Bay Road

City Osterville State MA Zip Code 02655

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

Name of Employer Self-Employed Occupation Real Estate Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2006

Transaction ID: 60320.C156914

Amount of Each Receipt this Period 500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
An Ledang

Mailing Address 1006 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 ▼ 200.00

Date of Receipt 03 / 22 / 2006

Transaction ID: 60410.C157130

Amount of Each Receipt this Period 200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 950.00

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 14 / 54
	<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

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

A.	Full Name (Last, First, Middle Initial) Kent Lucken	Date of Receipt MM / DD / YYYY 03 / 28 / 2006
	Mailing Address 65 Fellsmere Road	Transaction ID: 60410.C157381
	City State Zip Code Newton MA 02459	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation The Citigroup Private Bank Private Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) John Marsh	Date of Receipt MM / DD / YYYY 03 / 07 / 2006
	Mailing Address 1213 Heatherwood	Transaction ID: 60320.C155906
	City State Zip Code Yarmouth MA 02675	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Holt Massey	Date of Receipt MM / DD / YYYY 03 / 13 / 2006
	Mailing Address 85 Merrimac Street	Transaction ID: 60320.C156422
	City State Zip Code Boston MA 02114	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Massey & Co., LLC Executive	
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)	▶	11500.00
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 / 54
(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)
John Moriarty
Mailing Address 25 Prospect Street
City Winchester State MA Zip Code 01890
FEC ID number of contributing federal political committee. **C**
Name of Employer Moriarty and Associates Occupation Construction
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 03 / 29 / 2006
Transaction ID: 60410.C157447
Amount of Each Receipt this Period 10000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Gregory Morzano
Mailing Address 107 Love Lane
City Weston State MA Zip Code 02493
FEC ID number of contributing federal political committee. **C**
Name of Employer Liberty Mutual Occupation Investment Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 09 / 2006
Transaction ID: 60320.C156278
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Christiane Munkholm
Mailing Address 165 Chestnut Hill Ave. #3
City Brighton State MA Zip Code 02135
FEC ID number of contributing federal political committee. **C**
Name of Employer Seahorse Bioscience Occupation chemist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00
Date of Receipt 03 / 28 / 2006
Transaction ID: 60410.C157385
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 10450.00
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 / 54
(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)
Michael OMalley
Mailing Address 1 Kelly Ln.
City Hudson State MA Zip Code 01749
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 09 / 2006
Transaction ID: 60320.C156305
Amount of Each Receipt this Period: 150.00
Receipt

Name of Employer Information Requested: Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 250.00

B. Full Name (Last, First, Middle Initial)
John Pearson
Mailing Address 99 Belmont Ave
City Lowell State MA Zip Code 01852
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 20 / 2006
Transaction ID: 60320.C157011
Amount of Each Receipt this Period: 2500.00
Receipt

Name of Employer: Pearson & Pearson/ Butler Bank Occupation: Attorney/ Banker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 2500.00

C. Full Name (Last, First, Middle Initial)
Richard Phipps
Mailing Address 1180 Main Street
City Wakefield State MA Zip Code 01880
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 08 / 2006
Transaction ID: 60320.C155928
Amount of Each Receipt this Period: 100.00
Receipt

Name of Employer: Self Employed Occupation: Accountant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 100.00

SUBTOTAL of Receipts This Page (optional) ► 2750.00
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 / 54
(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)
Richard Phipps

Mailing Address 1180 Main Street

City State Zip Code
Wakefield MA 01880

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

Name of Employer Self Employed Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2006

Transaction ID: 60320.C156699

Amount of Each Receipt this Period
100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Bruce Swerling

Mailing Address 15 Pine St

City State Zip Code
Weston MA 02493

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

Name of Employer Swerling Milton Warrick Occupation Insurance Adjustor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2006

Transaction ID: 60306.C155373

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Clayton Trefry

Mailing Address 21 Felton Ct.
DO NOT MAIL

City State Zip Code
Saugus MA 01906

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2006

Transaction ID: 60320.C156983

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 / 54
	(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) Herbert Vaughan		Date of Receipt MM / DD / YYYY 03 / 07 / 2006
Mailing Address 10 Longwood Drive Apartment 464		Transaction ID: 60320.C155731
City Westwood	State MA	Zip Code 02090
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.

Full Name (Last, First, Middle Initial) Andrew Wilde		Date of Receipt MM / DD / YYYY 03 / 02 / 2006
Mailing Address 1210 Greendale Ave Apt E3		Transaction ID: 60306.C155350
City Needham	State MA	Zip Code 02492
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	73700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 54
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input checked="" 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) Matthew Gauvin		Date of Receipt
Mailing Address 42 McKay Avenue DO NOT MAIL- not donor		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
City Fitchburg	State MA	Zip Code 01420-
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 60320.C156822
Name of Employer MassGOP	Occupation Field Coordinator	Amount of Each Receipt this Period <input type="text" value="1038.96"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1038.96"/>	Offsets to Operating Expenditure Note: cobra payment from former employee

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1038.96"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1038.96"/>

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 20 / 54

<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) SCM Associates	Transaction ID: 60320.E8226 Date of Disbursement 03 / 02 / 2006
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 1300.74
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mailing and Telemarketing non-FEA no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	DIRECT MAILING AND TELEMARKETING NON-FEA NO FEDERAL CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 60410.E8273 Date of Disbursement 03 / 16 / 2006
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 12023.64
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mailing and Telemarketing non fea no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	DIRECT MAILING AND TELEMARKETING NON FEA NO FEDERAL CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) SCM Associates	Transaction ID: 60410.E8323 Date of Disbursement 03 / 29 / 2006
	Mailing Address Steve Meyers 1283 Main Street	Amount of Each Disbursement this Period 14960.79
	City Dublin State NH Zip Code 03444-	
	Purpose of Disbursement Direct Mailing and Telemarketing non fea no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	DIRECT MAILING AND TELEMARKETING NON FEA NO FEDERAL CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► **28285.17**

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)

PAGE 21 / 54

<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) Associated Industries of Massachusetts	Transaction ID: 60410.E8264 Date of Disbursement
	Mailing Address PO Box 4070	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>
	City Burlington State MA Zip Code 01803-	Amount of Each Disbursement this Period
	Purpose of Disbursement Insurance	<input type="text" value="1925.00"/>
	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) ▼
		INSURANCE

B.	Full Name (Last, First, Middle Initial) Affiliated Managers AMG	Transaction ID: 60410.E8262 Date of Disbursement
	Mailing Address 600 Hale St.	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>
	City Beverly State MA Zip Code 01965-	Amount of Each Disbursement this Period
	Purpose of Disbursement Administrative Office support- Non FEA	<input type="text" value="1205.00"/>
	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) ▼
		ADMINISTRATIVE OFFICE SUPP- ORT- NON FEA

C.	Full Name (Last, First, Middle Initial) Rhonda Avola	Transaction ID: 60410.E8263 Date of Disbursement
	Mailing Address 306 Main St. Unit 10	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>
	City Melrose State MA Zip Code 02176-	Amount of Each Disbursement this Period
	Purpose of Disbursement Administration Service Non FEA No federal candidate	<input type="text" value="1617.00"/>
	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) ▼
		ADMINISTRATION SERVICE NON FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4747.00"/>
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) Brandon Barber	Transaction ID: 60320.E8218 Date of Disbursement 03 / 02 / 2006
	Mailing Address 106 Kendall Pond Rd.	Amount of Each Disbursement this Period 426.60
	City Windham State NH Zip Code 03087-	
	Purpose of Disbursement Reimbursement- parking/ travel/ food 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) ▼
		REIMBURSEMENT- PARKING/ TRAVLE/ FOOD

B.	Full Name (Last, First, Middle Initial) Boston Beer Work	Transaction ID: 60410.E8284 Date of Disbursement 03 / 23 / 2006
	Mailing Address 112 Canal St.	Amount of Each Disbursement this Period 738.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Catering for reception- Non FEA no federal candidate 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) ▼
		CATERING FOR RECEPTION- NON FEA NO FEDERAL CANIDA- TE

C.	Full Name (Last, First, Middle Initial) Boy Genius- Boy Genius Inc.	Transaction ID: 60410.E8266 Date of Disbursement 03 / 16 / 2006
	Mailing Address PO Box 61	Amount of Each Disbursement this Period 2248.75
	City Pascoag State RI Zip Code 02859-	
	Purpose of Disbursement Web Hosting 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) ▼
		WEB HOSTING

SUBTOTAL of Disbursements This Page (optional)	3413.35
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) Abby Brack Photography</p> <p>Mailing Address 19 Sheafe St.</p> <p>City Boston State MA Zip Code 02113-</p> <p>Purpose of Disbursement Photography for party event Non-FEA no federal candidate</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: 60320.E8217 Date of Disbursement 03 / 02 / 2006</p> <p>Amount of Each Disbursement this Period 645.49</p> <p>PHOTOGRAPHY FOR PARTY EVENT NON-FEA NO FEDERAL CANDIDATE</p>
<p>B. Full Name (Last, First, Middle Initial) Repro-graphics Cambridge</p> <p>Mailing Address 21 McGrath Highway</p> <p>City Somerville State MA Zip Code 02143-</p> <p>Purpose of Disbursement general printing non-fea no federal candidate</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: 60410.E8285 Date of Disbursement 03 / 23 / 2006</p> <p>Amount of Each Disbursement this Period 1574.51</p> <p>GENERAL PRINTING NON-FEA NO FEDERAL CANDIDATE</p>
<p>C. Full Name (Last, First, Middle Initial) Cambridge Offset Printing</p> <p>Mailing Address 56 Creighton Street</p> <p>City Cambridge State MA Zip Code 02140-</p> <p>Purpose of Disbursement general printing non-fea no federal candidate</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: 60320.E8209 Date of Disbursement 03 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 3617.25</p> <p>GENERAL PRINTING NON-FEA NO FEDERAL CANDIDATE</p>

SUBTOTAL of Disbursements This Page (optional)	5837.25
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) Css Castle Self-Storage	Transaction ID: 60410.E8267 Date of Disbursement 03 / 16 / 2006
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 80.08
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement Storage	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) ▼
		STORAGE

B.	Full Name (Last, First, Middle Initial) Css Castle Self-Storage	Transaction ID: 60410.E8318 Date of Disbursement 03 / 30 / 2006
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 289.12
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement Storage	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) ▼
		STORAGE

C.	Full Name (Last, First, Middle Initial) CDW CDW	Transaction ID: 60320.E8220 Date of Disbursement 03 / 02 / 2006
	Mailing Address 50 S. LaSalle Street	Amount of Each Disbursement this Period 329.00
	City Chicago State IL Zip Code 60675-	
	Purpose of Disbursement Computer Equipment	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) ▼
		COMPUTER EQUIPMENT

SUBTOTAL of Disbursements This Page (optional) ▶

698.20

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 25 / 54

<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) CDW CDW	Transaction ID: 60410.E8252 Date of Disbursement 03 / 09 / 2006
	Mailing Address 50 S. LaSalle Street	Amount of Each Disbursement this Period 605.05
	City Chicago State IL Zip Code 60675-	
	Purpose of Disbursement Computer Equipment	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) ▼
		COMPUTER EQUIPMENT

B.	Full Name (Last, First, Middle Initial) CDW CDW	Transaction ID: 60410.E8268 Date of Disbursement 03 / 16 / 2006
	Mailing Address 50 S. LaSalle Street	Amount of Each Disbursement this Period 427.63
	City Chicago State IL Zip Code 60675-	
	Purpose of Disbursement Computer Equipment	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) ▼
		COMPUTER EQUIPMENT

C.	Full Name (Last, First, Middle Initial) CPMA, Inc.	Transaction ID: 60320.E8221 Date of Disbursement 03 / 02 / 2006
	Mailing Address 84 Prescott St. Suite 21	Amount of Each Disbursement this Period 11000.00
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement Political- Consulting Non FEA no political candidate	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) ▼
		POLITICAL- CONSULTING NON FEA NO POLITICAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional) ▶

12032.68

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) Paul Craney Mailing Address 177 Cambridge Ave City Fair Haven State NJ Zip Code 07704- Purpose of Disbursement REimbursement- parking/travle/food 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: 60320.E8223 Date of Disbursement 03 / 02 / 2006 Amount of Each Disbursement this Period 6.00 REIMBURSEMENT- PARKING/TR- AVLE/FOOD
B.	Full Name (Last, First, Middle Initial) Paul Craney Mailing Address 177 Cambridge Ave City Fair Haven State NJ Zip Code 07704- Purpose of Disbursement Reimbursement- parking/travle/food 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: 60320.E8213 Date of Disbursement 03 / 06 / 2006 Amount of Each Disbursement this Period 60.80 REIMBURSEMENT- PARKING/TR- AVLE/FOOD
C.	Full Name (Last, First, Middle Initial) Paul Craney Mailing Address 177 Cambridge Ave City Fair Haven State NJ Zip Code 07704- Purpose of Disbursement Reimbursement: See Below 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: 60410.E8257 Date of Disbursement 03 / 09 / 2006 Amount of Each Disbursement this Period 344.30 REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	411.10
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.</p> <p>Full Name (Last, First, Middle Initial) Paul Craney</p> <p>Mailing Address 177 Cambridge Ave</p> <p>City Fair Haven State NJ Zip Code 07704-</p> <p>Purpose of Disbursement Reimbursement- parking/ travel/ food</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: 60410.E8291</p> <p>Date of Disbursement 03 / 23 / 2006</p> <p>Amount of Each Disbursement this Period 25.44</p> <p>REIMBURSEMENT- PARKING/ TRAVEL/ FOOD</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dell Dell Computer</p> <p>Mailing Address PO Box 9020</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Computer equipment</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: 60410.E8286</p> <p>Date of Disbursement 03 / 23 / 2006</p> <p>Amount of Each Disbursement this Period 278.19</p> <p>COMPUTER EQUIPMENT</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DirecTV DirecTV</p> <p>Mailing Address PO Box 60036</p> <p>City Los Angeles State CA Zip Code 90060-0036</p> <p>Purpose of Disbursement Cable Service</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: 60410.E8269</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 144.90</p> <p>CABLE SERVICE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

448.53

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) Donatelli Avella, Inc.	Transaction ID: 60410.E8321 Date of Disbursement 03 / 29 / 2006
	Mailing Address P.O. Box 25784	Amount of Each Disbursement this Period 3392.48
	City Alexandria State VA Zip Code 22313-	
	Purpose of Disbursement General candidate recruitment mailing non-fea candidate	GENERAL CANDIDATE RECRUITMENT MAILING NON-FEA CANDIDATE
	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) Federal Express (Fed Ex)	Transaction ID: 60410.E8278 Date of Disbursement 03 / 20 / 2006
	Mailing Address PO Box 371461	Amount of Each Disbursement this Period 112.69
	City Pittsburgh State PA Zip Code 15250-	
	Purpose of Disbursement Shipping	SHIPPING
	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) Brandon Finn	Transaction ID: 60410.E8319 Date of Disbursement 03 / 30 / 2006
	Mailing Address 163 Belmont St. Apt.1	Amount of Each Disbursement this Period 106.20
	City Belmont State MA Zip Code 02478-	
	Purpose of Disbursement Riembursement- parking/ travle/ food	RIEMBURSEMENT- PARKING/ TRAVLE/ FOOD
	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)	3611.37
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) Full Impact Production Mailing Address 97 Betts Rd. City Belmont State MA Zip Code 02478- Purpose of Disbursement Event planning fee- general party event 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: 60411.E8331 Date of Disbursement 03 / 23 / 2006 Amount of Each Disbursement this Period 4048.00 EVENT PLANNING FEE- GENERAL PARTY EVENT NON-FEA
B.	Full Name (Last, First, Middle Initial) Garage Government Center Mailing Address 50 New Sudbury Street City Boston State MA Zip Code 02114- Purpose of Disbursement 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: 60410.E8320 Date of Disbursement 03 / 29 / 2006 Amount of Each Disbursement this Period 1200.00 PARKING
C.	Full Name (Last, First, Middle Initial) Guardian Guardian Mailing Address Boston Group Office 1 Liberty Square City Boston State MA Zip Code 02109- Purpose of Disbursement Insurance 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: 60411.E8328 Date of Disbursement 03 / 01 / 2006 Amount of Each Disbursement this Period 814.88 INSURANCE

SUBTOTAL of Disbursements This Page (optional) ▶	6062.88
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) Bruce Harrison	Transaction ID: 60320.E8219 Date of Disbursement 03 / 02 / 2006
	Mailing Address 101 Elm St	Amount of Each Disbursement this Period 1000.00
	City Wakefield State MA Zip Code 01880-	
	Purpose of Disbursement General Administrative Service- non FEA no federal candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	GENERAL ADMINISTRATIVE SE- RVICE- NON FEA NO FEDERAL CANDIDATE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bruce Harrison	Transaction ID: 60410.E8251 Date of Disbursement 03 / 09 / 2006
	Mailing Address 101 Elm St	Amount of Each Disbursement this Period 32.24
	City Wakefield State MA Zip Code 01880-	
	Purpose of Disbursement Reimbursement- parking/ travel/ food	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT- PARKING/ TRAVLE/ FOOD
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) HPH Inc. Harvard Pilgram Heal	Transaction ID: 60410.E8279 Date of Disbursement 03 / 20 / 2006
	Mailing Address 1200 Crown Colony Dr.	Amount of Each Disbursement this Period 5515.62
	City Quincy State MA Zip Code 02169-	
	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:	HEALTH INSURANCE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

6547.86

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) Backbay Hilton Boston	Transaction ID: 60410.E8280 Date of Disbursement 03 / 20 / 2006
	Mailing Address 40 Dalton St.	Amount of Each Disbursement this Period 4050.00
	City Boston State MA Zip Code 02115-	
	Purpose of Disbursement Event room and Catering non FEA event no federal candidate	Category/ Type EVENT ROOM AND CATERING NON FEA EVENT NO FEDERAL CANDIDATE
	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) Michael Segal Insta Trac Inc.	Transaction ID: 60410.E8277 Date of Disbursement 03 / 16 / 2006
	Mailing Address 47 Winter St.	Amount of Each Disbursement this Period 4200.00
	City Boston State MA Zip Code 02108-	
	Purpose of Disbursement Research	Category/ Type RESEARCH
	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) Intranets.Com Intranets.Com	Transaction ID: 60320.E8210 Date of Disbursement 03 / 06 / 2006
	Mailing Address PO Box 414725	Amount of Each Disbursement this Period 140.00
	City Boston State MA Zip Code 02241-4725	
	Purpose of Disbursement Computer servicece	Category/ Type COMPUTER SERVICECE
	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) ▶

8390.00

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

<p>A. Full Name (Last, First, Middle Initial) Jason Kauppi</p> <p>Mailing Address Kauppi Communications 28 State St.</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement PR Consulting/ writing (non-FEA general writing)</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: 60320.E8222 Date of Disbursement 03 / 02 / 2006</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>PR CONSULTING/ WRITING (NON-FEA GENERAL WRITING)</p>
<p>B. Full Name (Last, First, Middle Initial) Jason Kauppi</p> <p>Mailing Address Kauppi Communications 28 State St.</p> <p>City Boston State MA Zip Code 02109-</p> <p>Purpose of Disbursement PR Consulting/ writing (non-FEA general writing)</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: 60410.E8281 Date of Disbursement 03 / 20 / 2006</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>PR CONSULTING/ WRITING (NON-FEA GENERAL WRITING)</p>
<p>C. Full Name (Last, First, Middle Initial) Lexis-Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-</p> <p>Purpose of Disbursement Research Data</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: 60410.E8271 Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 913.00</p> <p>RESEARCH DATA</p>

SUBTOTAL of Disbursements This Page (optional)	12413.00
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) Locke-Ober Locke-Ober Banquets Mailing Address 3 Winter Place Attn: Julia Anderson City Boston State MA Zip Code 02108- Purpose of Disbursement event catering non-FEA no federal candidate 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: 60410.E8294 Date of Disbursement 03 / 23 / 2006 Amount of Each Disbursement this Period 60.00 EVENT CATERING NON-FEA NO FEDERAL CANDIDATE	
B.	Full Name (Last, First, Middle Initial) Locke-Ober Locke-Ober Banquets Mailing Address 3 Winter Place Attn: Julia Anderson City Boston State MA Zip Code 02108- Purpose of Disbursement event catering non-FEA no federal candidate 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: 60410.E8287 Date of Disbursement 03 / 23 / 2006 Amount of Each Disbursement this Period 2500.00 EVENT CATERING NON-FEA NO FEDERAL CANDIDATE	
C.	Full Name (Last, First, Middle Initial) Lotus Designs Mailing Address 547 A Columbus Ave. City Boston State MA Zip Code 02118- Purpose of Disbursement Event supplies- table center pieces for general Party event. non FEA event no federal cand 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: 60410.E8272 Date of Disbursement 03 / 16 / 2006 Amount of Each Disbursement this Period 361.25 EVENT SUPPLIES- TABLE CENTER PIECES FOR GENERAL PARTY EVENT. NON FEA EVENT NO FEDERAL CAND	

SUBTOTAL of Disbursements This Page (optional)	2921.25
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 / 54

<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 <hr/> Mailing Address 2345 Commonwealth Ave. <hr/> City Newton State MA Zip Code 02466- <hr/> Purpose of Disbursement Event room and catering non-FEA no federal candidate Candidate Name <hr/> 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: 60410.E8289 Date of Disbursement 03 / 23 / 2006 <hr/> Amount of Each Disbursement this Period 2407.37 <hr/> EVENT ROOM AND CATERING NON-FEA NO FEDERAL CANDIDATE	
B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems <hr/> Mailing Address P.O. Box 7247-0322 <hr/> City Philadelphia State PA Zip Code 19170-0322 <hr/> Purpose of Disbursement Copier Rental Candidate Name <hr/> 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: 60410.E8270 Date of Disbursement 03 / 16 / 2006 <hr/> Amount of Each Disbursement this Period 976.70 <hr/> COPIER RENTAL	
C.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems <hr/> Mailing Address P.O. Box 7247-0322 <hr/> City Philadelphia State PA Zip Code 19170-0322 <hr/> Purpose of Disbursement Copier Toner Candidate Name <hr/> 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: 60410.E8255 Date of Disbursement 03 / 23 / 2006 <hr/> Amount of Each Disbursement this Period 58.57 <hr/> COPIER TONER	

SUBTOTAL of Disbursements This Page (optional) ▶

3442.64

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) OBrien Inc.- OBrien Communicatio	Transaction ID: 60410.E8283 Date of Disbursement MM / DD / YYYY 03 / 20 / 2006
	Mailing Address PO Box 659	Amount of Each Disbursement this Period 432.50
	City Wrentham State MA Zip Code 02093-	
	Purpose of Disbursement Telephone Service 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) ▼
		TELEPHONE SERVICE

B.	Full Name (Last, First, Middle Initial) Omni Parker House	Transaction ID: 60320.E8211 Date of Disbursement MM / DD / YYYY 03 / 06 / 2006
	Mailing Address 60 School Street	Amount of Each Disbursement this Period 294.39
	City Boston State MA Zip Code 02108-	
	Purpose of Disbursement Event-Room charge for general party event Non FEA no federal candidate 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) ▼
		EVENT-ROOM CHARGE FOR GENERAL PARTY EVENT NON FEA NO FEDERAL CANDIDATE

C.	Full Name (Last, First, Middle Initial) Ox-Eye Properties	Transaction ID: 60410.E8256 Date of Disbursement MM / DD / YYYY 03 / 09 / 2006
	Mailing Address c/o Massey & Co. 85 Merrimac Street	Amount of Each Disbursement this Period 808.38
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement 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) ▼
		RENT

SUBTOTAL of Disbursements This Page (optional)	▶	1535.27
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) Ox-Eye Properties	Transaction ID: 60410.E8290 Date of Disbursement 03 / 23 / 2006
	Mailing Address c/o Massey & Co. 85 Merrimac Street	Amount of Each Disbursement this Period 4971.30
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement 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) ▼
		RENT

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 60320.E8208 Date of Disbursement 03 / 09 / 2006
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1480.76
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll-401 K	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) ▼
		PAYROLL-401 K

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 60320.E8207 Date of Disbursement 03 / 09 / 2006
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 8597.80
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll-Tax	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) ▼
		PAYROLL-TAX

SUBTOTAL of Disbursements This Page (optional)	15049.86
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) Paychex/InterPay	Transaction ID: 60411.E8329 Date of Disbursement 03 / 10 / 2006
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 150.91
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Service	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) ▼
		PAYROLL SERVICE

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 60411.E8330 Date of Disbursement 03 / 10 / 2006
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 160.00
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Service-401 K	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) ▼
		PAYROLL SERVICE-401 K

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 60410.E8249 Date of Disbursement 03 / 23 / 2006
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 9225.48
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll-taxes	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) ▼
		PAYROLL-TAXES

SUBTOTAL of Disbursements This Page (optional)	▶	9536.39
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) Paychex/InterPay</p> <p>Mailing Address PO Box 8295</p> <p>City Boston State MA Zip Code 02266-</p> <p>Purpose of Disbursement Payroll-401 K</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: 60410.E8250 Date of Disbursement 03 / 23 / 2006</p> <p>Amount of Each Disbursement this Period 1480.76</p> <p>PAYROLL-401 K</p>
<p>B. Full Name (Last, First, Middle Initial) Poland Spring Poland Spring</p> <p>Mailing Address Processing Center PO Box 52271</p> <p>City Phoenix State AZ Zip Code 85072-</p> <p>Purpose of Disbursement Bottle Water</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: 60410.E8282 Date of Disbursement 03 / 20 / 2006</p> <p>Amount of Each Disbursement this Period 65.14</p> <p>BOTTLE WATER</p>
<p>C. Full Name (Last, First, Middle Initial) Boston Postmaster</p> <p>Mailing Address JW MCCORMACK STATION New Chardon Street</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement Postage-General use- not related to federal candidate</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: 60320.E8224 Date of Disbursement 03 / 02 / 2006</p> <p>Amount of Each Disbursement this Period 3632.25</p> <p>POSTAGE-GENERAL USE- NOT RELATED TO FEDERAL CANDIDATE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5178.15

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 Postmaster	Transaction ID: 60410.E8292 Date of Disbursement 03 / 23 / 2006
	Mailing Address JW MCCORMACK STATION New Chardon Street	Amount of Each Disbursement this Period 40.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Postage-General use 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) ▼
		POSTAGE-GENERAL USE NON-FEA

B.	Full Name (Last, First, Middle Initial) Jinara Reyes	Transaction ID: 60410.E8254 Date of Disbursement 03 / 09 / 2006
	Mailing Address 66 Greenleaf St. Apt. # 33	Amount of Each Disbursement this Period 131.80
	City Quincy State MA Zip Code 02169-	
	Purpose of Disbursement Reimbursement- parking/ travel/ food 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) ▼
		REIMBURSEMENT- PARKING/ TRAVEL/ FOOD

C.	Full Name (Last, First, Middle Initial) Ritz Carlton Hotel	Transaction ID: 60410.E8322 Date of Disbursement 03 / 29 / 2006
	Mailing Address 15 Arlington St.	Amount of Each Disbursement this Period 63.70
	City Boston State MA Zip Code 02118-	
	Purpose of Disbursement Event Catering for general party event non FEA no federal candidate 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) ▼
		EVENT CATERING FOR GENERAL PARTY EVENT NON FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional)	▶	235.50
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) Steven Roche	Transaction ID: 60320.E8227 Date of Disbursement 03 / 02 / 2006
	Mailing Address 4 Leblanc Dr	Amount of Each Disbursement this Period 4970.91
	City Danvers State MA Zip Code 01923-	
	Purpose of Disbursement Reimbursement: See Below 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) ▼
		REIMBURSEMENT: SEE BELOW

B.	Full Name (Last, First, Middle Initial) Omni Parker House	Transaction ID: 60320.E8228 Date of Disbursement 03 / 02 / 2006
	Mailing Address 60 School Street	Amount of Each Disbursement this Period 1974.19
	City Boston State MA Zip Code 02108-	
	Purpose of Disbursement S.Roche reimbursement for event charge 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) ▼
		[MEMO ITEM] MEMO: S.ROCHE REIMBURSEMENT FOR EVENT CHARGE

C.	Full Name (Last, First, Middle Initial) Laz Parking Ltd.	Transaction ID: 60320.E8230 Date of Disbursement 03 / 02 / 2006
	Mailing Address 101 Merrimac Street	Amount of Each Disbursement this Period 375.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement S.Roche Reimbursement for parking 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) ▼
		[MEMO ITEM] MEMO: S.ROCHE REIMBURSEMENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)	4970.91
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) Ritz Carlton Hotel Mailing Address 15 Arlington St. City Boston State MA Zip Code 02118- Purpose of Disbursement S.Roche Reimbursement of Event charge 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: 60320.E8229 Date of Disbursement 03 / 02 / 2006
	Amount of Each Disbursement this Period 2222.62 [MEMO ITEM] MEMO: S. ROCHE REIMBURSEMENT OF EVENT CHARGE

B. Full Name (Last, First, Middle Initial) Steven Roche Mailing Address 4 Leblanc Dr City Danvers State MA Zip Code 01923- Purpose of Disbursement Reimbursement: See Below 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: 60320.E8214 Date of Disbursement 03 / 06 / 2006
	Amount of Each Disbursement this Period 465.90 REIMBURSEMENT: SEE BELOW

C. Full Name (Last, First, Middle Initial) Occidental The Occidental Mailing Address 1475 Pennylvannia Ave. NW City Washington State DC Zip Code 20004- Purpose of Disbursement S.Roche Reimbursement for Meals 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: 60320.E8215 Date of Disbursement 03 / 06 / 2006
	Amount of Each Disbursement this Period 236.80 [MEMO ITEM] MEMO: S. ROCHE REIMBURSEMENT FOR MEALS

SUBTOTAL of Disbursements This Page (optional) ▶	465.90
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) Priscilla Ruzzo	Transaction ID: 60320.E8225 Date of Disbursement 03 / 02 / 2006
	Mailing Address 85 Overlook Road	Amount of Each Disbursement this Period 239.75
	City Boston State MA Zip Code 02132-	
	Purpose of Disbursement 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Ensieh Sarrami	Transaction ID: 60410.E8317 Date of Disbursement 03 / 30 / 2006
	Mailing Address 9214 Inglewood Dr.	Amount of Each Disbursement this Period 407.98
	City Potomac State MD Zip Code 20854-	
	Purpose of Disbursement REIMBURSEMENT- PARKING/ TRAVLE/ FOOD- ALL UNDER \$50- NO NEEDED	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) ▼
		REIMBURSEMENT- PARKING/ TRAVLE/ FOOD- ALL UNDER \$50- NO NEEDED

C.	Full Name (Last, First, Middle Initial) Lydia Shire	Transaction ID: 60410.E8288 Date of Disbursement 03 / 23 / 2006
	Mailing Address 137 Wellesley Street	Amount of Each Disbursement this Period 230.74
	City Weston State MA Zip Code 02493-	
	Purpose of Disbursement Reimbursement for event food non FEA event no federal candidate	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) ▼
		REIMBURSEMENT FOR EVENT FOOD NON FEA EVENT NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional)	878.47
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)

<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) Staples, Inc.	Transaction ID: 60410.E8324 Date of Disbursement 03 / 29 / 2006
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 104.95
	City Des Moines	State IA
	Zip Code 50368-9020	Category/ Type
	Purpose of Disbursement Office Supplies	OFFICE SUPPLIES
	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) T-Mobile T-Mobile	Transaction ID: 60410.E8274 Date of Disbursement 03 / 16 / 2006
	Mailing Address PO Box 790047	Amount of Each Disbursement this Period 1190.68
	City Saint Louis	State MO
	Zip Code 63179-	Category/ Type
	Purpose of Disbursement Phone Service	PHONE SERVICE
	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) The Amaral Group	Transaction ID: 60410.E8261 Date of Disbursement 03 / 09 / 2006
	Mailing Address 201 Great Rd. Suite #2	Amount of Each Disbursement this Period 2120.00
	City Acton	State MA
	Zip Code 01720-	Category/ Type
	Purpose of Disbursement Network Support	NETWORK SUPPORT
	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)	3415.63
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

A.	Full Name (Last, First, Middle Initial) The Amaral Group	Transaction ID: 60410.E8293 Date of Disbursement MM / DD / YYYY 03 / 23 / 2006
	Mailing Address 201 Great Rd. Suite #2	Amount of Each Disbursement this Period 1280.00
	City Acton State MA Zip Code 01720-	
	Purpose of Disbursement Network Support 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) ▼
		NETWORK SUPPORT

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 60410.E8275 Date of Disbursement MM / DD / YYYY 03 / 16 / 2006
	Mailing Address P.O. Box 1	Amount of Each Disbursement this Period 972.82
	City Worcester State MA Zip Code 01654-	
	Purpose of Disbursement 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) ▼
		PHONE

C.	Full Name (Last, First, Middle Initial) Verizon Internet Services	Transaction ID: 60410.E8276 Date of Disbursement MM / DD / YYYY 03 / 16 / 2006
	Mailing Address PO Box 101096	Amount of Each Disbursement this Period 767.62
	City Atlanta State GA Zip Code 30392-	
	Purpose of Disbursement Internet service 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) ▼
		INTERNET SERVICE

SUBTOTAL of Disbursements This Page (optional)	3020.44
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) Robert Willington	Transaction ID: 60410.E8259 Date of Disbursement 03 / 09 / 2006
	Mailing Address 12 Arlington Street	Amount of Each Disbursement this Period 162.34
	City Reading State MA Zip Code 01867-	
	Purpose of Disbursement Reimbursement: See Below 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) ▼
		REIMBURSEMENT: SEE BELOW

B.	Full Name (Last, First, Middle Initial) Anthem Restaurant	Transaction ID: 60410.E8260 Date of Disbursement 03 / 09 / 2006
	Mailing Address 138 Portland St.	Amount of Each Disbursement this Period 105.99
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement R.Willington Reimbursement for meals 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) ▼
		[MEMO ITEM] MEMO: R.WILLINGTON REIMBURSEMENT FOR MEALS

C.	Full Name (Last, First, Middle Initial) Hogi Yoon	Transaction ID: 60410.E8253 Date of Disbursement 03 / 09 / 2006
	Mailing Address 400 Mass Ave. #34	Amount of Each Disbursement this Period 400.00
	City Boston State MA Zip Code 02115-	
	Purpose of Disbursement Event entertainment- musician for general Party event; 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) ▼
		EVENT ENTERTAINMENT- MUSICIAN FOR GENERAL PARTY EVENT; NON-FEA

SUBTOTAL of Disbursements This Page (optional)	562.34
TOTAL This Period (last page this line number only)	144111.14

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)

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<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) Brandon Barber <hr/> Mailing Address 106 Kendall Pond Rd. <hr/> City Windham State NH Zip Code 03087- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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: 60320.E8196 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6	Amount of Each Disbursement this Period 1022.44
B.	Full Name (Last, First, Middle Initial) Brandon Barber <hr/> Mailing Address 106 Kendall Pond Rd. <hr/> City Windham State NH Zip Code 03087- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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: 60410.E8235 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6	Amount of Each Disbursement this Period 1022.44
C.	Full Name (Last, First, Middle Initial) Paul Craney <hr/> Mailing Address 177 Cambridge Ave <hr/> City Fair Haven State NJ Zip Code 07704- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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: 60320.E8197 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6	Amount of Each Disbursement this Period 1080.10

SUBTOTAL of Disbursements This Page (optional)	3124.98
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)

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<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) Paul Craney	Transaction ID: 60410.E8236 Date of Disbursement 03 / 23 / 2006
	Mailing Address 177 Cambridge Ave	
	City Fair Haven State NJ Zip Code 07704-	Amount of Each Disbursement this Period 1080.10
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Brandon Finn	Transaction ID: 60320.E8198 Date of Disbursement 03 / 09 / 2006
	Mailing Address 163 Belmont St. Apt.1	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 1016.65
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Brandon Finn	Transaction ID: 60410.E8237 Date of Disbursement 03 / 23 / 2006
	Mailing Address 163 Belmont St. Apt.1	
	City Belmont State MA Zip Code 02478-	Amount of Each Disbursement this Period 1016.65
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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)	3113.40
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)

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<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) Lyndsay Jones	Transaction ID: 60410.E8238 Date of Disbursement 03 / 23 / 2006
	Mailing Address 16 Oval Road	
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period 530.47
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Samantha Levine	Transaction ID: 60410.E8239 Date of Disbursement 03 / 23 / 2006
	Mailing Address 15 Oak St.	
	City Chestnut Hill State MA Zip Code 02467-	Amount of Each Disbursement this Period 474.32
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Ladd Moore	Transaction ID: 60320.E8199 Date of Disbursement 03 / 09 / 2006
	Mailing Address 51 Phillips St. Apt. # 1	
	City Boston State MA Zip Code 02114-	Amount of Each Disbursement this Period 967.04
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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)	1971.83
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)

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<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) Ladd Moore Mailing Address 51 Phillips St. Apt. # 1 City Boston State MA Zip Code 02114- Purpose of Disbursement Payroll 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: 60410.E8240 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6	Amount of Each Disbursement this Period 967.04 PAYROLL
B.	Full Name (Last, First, Middle Initial) Jinara Reyes Mailing Address 66 Greenleaf St. Apt. # 33 City Quincy State MA Zip Code 02169- Purpose of Disbursement Payroll 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: 60320.E8200 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6	Amount of Each Disbursement this Period 1323.34 PAYROLL
C.	Full Name (Last, First, Middle Initial) Jinara Reyes Mailing Address 66 Greenleaf St. Apt. # 33 City Quincy State MA Zip Code 02169- Purpose of Disbursement Payroll 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: 60410.E8241 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6	Amount of Each Disbursement this Period 1323.34 PAYROLL

SUBTOTAL of Disbursements This Page (optional)	3613.72
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 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) Ruth Rice	Transaction ID: 60410.E8242 Date of Disbursement 03 / 23 / 2006
	Mailing Address 30 Fernview Apt 1	
	City North Andover State MA Zip Code 01845-	Amount of Each Disbursement this Period 829.67
	Purpose of Disbursement Payroll 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Steven Roche	Transaction ID: 60320.E8201 Date of Disbursement 03 / 09 / 2006
	Mailing Address 4 Leblanc Dr	
	City Danvers State MA Zip Code 01923-	Amount of Each Disbursement this Period 2739.53
	Purpose of Disbursement Payroll 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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Steven Roche	Transaction ID: 60410.E8243 Date of Disbursement 03 / 23 / 2006
	Mailing Address 4 Leblanc Dr	
	City Danvers State MA Zip Code 01923-	Amount of Each Disbursement this Period 2739.53
	Purpose of Disbursement Paryoll 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) ▼
		PARYOLL

SUBTOTAL of Disbursements This Page (optional) ▶

6308.73

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 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) Mark Rowe	Transaction ID: 60320.E8202 Date of Disbursement 03 / 09 / 2006
	Mailing Address 216 W. Plain St.	
	City Wayland State MA Zip Code 01778-	Amount of Each Disbursement this Period 1206.39
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Mark Rowe	Transaction ID: 60410.E8244 Date of Disbursement 03 / 23 / 2006
	Mailing Address 216 W. Plain St.	
	City Wayland State MA Zip Code 01778-	Amount of Each Disbursement this Period 1206.39
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Priscilla Ruzzo	Transaction ID: 60320.E8203 Date of Disbursement 03 / 09 / 2006
	Mailing Address 85 Overlook Road	
	City Boston State MA Zip Code 02132-	Amount of Each Disbursement this Period 1599.22
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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)	4012.00
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)

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<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) Priscilla Ruzzo	Transaction ID: 60410.E8245 Date of Disbursement 03 / 23 / 2006
	Mailing Address 85 Overlook Road	Amount of Each Disbursement this Period 1599.22
	City Boston State MA Zip Code 02132-	
	Purpose of Disbursement Payroll 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Ensieh Sarrami	Transaction ID: 60320.E8204 Date of Disbursement 03 / 09 / 2006
	Mailing Address 9214 Inglewood Dr.	Amount of Each Disbursement this Period 967.03
	City Potomac State MD Zip Code 20854-	
	Purpose of Disbursement Payroll 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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Ensieh Sarrami	Transaction ID: 60410.E8246 Date of Disbursement 03 / 23 / 2006
	Mailing Address 9214 Inglewood Dr.	Amount of Each Disbursement this Period 967.03
	City Potomac State MD Zip Code 20854-	
	Purpose of Disbursement Payroll 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) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	3533.28
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)

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<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) Robert Willington <hr/> Mailing Address 12 Arlington Street <hr/> City Reading State MA Zip Code 01867- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 60320.E8205 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 1231.44 <hr/> PAYROLL
B.	Full Name (Last, First, Middle Initial) Robert Willington <hr/> Mailing Address 12 Arlington Street <hr/> City Reading State MA Zip Code 01867- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 60410.E8247 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 1231.44 <hr/> PARYOLL
C.	Full Name (Last, First, Middle Initial) Matthew Wylie <hr/> Mailing Address 169 Monsignor OBrien Highway #705 <hr/> City Cambridge State MA Zip Code 02141- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 60320.E8206 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 2561.81 <hr/> PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	5024.69
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)

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<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)

Matthew Wylie

Transaction ID: 60410.E8248

Date of Disbursement

^M 0	^M 3	/	^D 2	^D 3	/	^Y 2	^Y 0	^Y 0	^Y 6
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Mailing Address 169 Monsignor OBrien Highway
#705

City State Zip Code
Cambridge MA 02141-

Amount of Each Disbursement this Period

2561.81

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PAYROLL

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2561.81

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

33264.44
