

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 Boston MA 02114 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2009 through 10 31 2009

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 11 19 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.

Table with 8 columns and 1 row for Office Use Only

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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		22603.34
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	73741.07									
(c) Total Receipts (from Line 19) .....	52902.96	565645.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	126644.03	588248.88								
7. Total Disbursements (from Line 31) .....	92452.85	554057.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	34191.18	34191.18								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1750.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	40369.33	372138.64
(ii) Unitemized .....	12499.00	153778.12
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	52868.33	525916.76
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	22300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	52868.33	548216.76
12. Transfers From Affiliated/Other Party Committees .....	0.00	5000.00
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) .....	34.63	12428.78
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)) .....	52902.96	565645.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	52902.96	565645.54

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	74622.24	439789.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	74622.24	439789.57
22. Transfers to Affiliated/Other Party Committees.....	738.57	5738.57
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	103.31
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	235.00
(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	235.00
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 .....	17092.04	108191.25
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	17092.04	108191.25
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	92452.85	554057.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92452.85	554057.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	52868.33	548216.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52868.33	547981.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	74622.24	439789.57
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	34.63	12428.78
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	74587.61	427360.79

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

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

FOR LINE NUMBER: PAGE 7 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Kristine Abrams

Mailing Address 33 Pleasant Heights Dr.

City State Zip Code  
North Easton MA 02356

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 31 / 2009

**Transaction ID:** 91116.C176913

Amount of Each Receipt this Period 200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Elisabeth Allison

Mailing Address 69 Pinehurst Rd.

City State Zip Code  
Belmont MA 02478

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested  
Anzi Ltd. Publishing Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 09 / 2009

**Transaction ID:** 91016.C176572

Amount of Each Receipt this Period 100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Otto Anderson

Mailing Address 43 Fernwood Avenue

City State Zip Code  
Bradford MA 01835

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 15 / 2009

**Transaction ID:** 91016.C176644

Amount of Each Receipt this Period 50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 350.00

**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 8 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Sally Bachelder	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address PO Box 521 DO NOT MAIL	<b>Transaction ID:</b> 91016.C176566
	City State Zip Code Westport Point MA 02791-0521	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Baker	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address 64 Caldwell Farm Rd.	<b>Transaction ID:</b> 91016.C176592
	City State Zip Code Byfield MA 01922	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Ballway	Date of Receipt MM / DD / YYYY 10 / 21 / 2009
	Mailing Address 2 Haymeadow Rd.	<b>Transaction ID:</b> 91022.C176863
	City State Zip Code Boxford MA 01921	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Employed Occupation Project Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 66

(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Barker

Mailing Address 437 Marlborough Street, #11

City State Zip Code  
Boston MA 02115

FEC ID number of contributing federal political committee. C

Name of Employer Attorney Occupation Foley Hoag

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y Y  
10 / 31 / 2009

Transaction ID: 91116.C176900

Amount of Each Receipt this Period 250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Harvey Bines

Mailing Address 36 Clarke St

City State Zip Code  
Lexington MA 02421

FEC ID number of contributing federal political committee. C

Name of Employer Sullivan & Worcester Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y Y  
10 / 30 / 2009

Transaction ID: 91116.C176885

Amount of Each Receipt this Period 1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Christopher Bramley

Mailing Address 7 Pinecrest Dr.

City State Zip Code  
Westborough MA 01581

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  
10 / 09 / 2009

Transaction ID: 91016.C176526

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 1350.00

**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 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Alan Butler

Mailing Address 318 Bishops Forest Dr.

City State Zip Code  
Waltham MA 02452

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

Name of Employer Occupation  
HNTB Companies Civil Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 9

Transaction ID: 91021.C176862

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Iris Cannata

Mailing Address 25 Fairway Lane

City State Zip Code  
Foxboro MA 02035

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

Name of Employer Occupation  
Self Employed Property Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

Transaction ID: 91116.C176924

Amount of Each Receipt this Period  
500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Gordon Carr

Mailing Address 23 High St.

City State Zip Code  
Hingham MA 02043

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: 91116.C176916

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Martha Chadwick

Mailing Address 1 Avery Street, #14-F

City Boston State MA Zip Code 02111

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

Name of Employer Commonwealth of Massachusetts Occupation Govs Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 13 / 2009

Transaction ID: 91016.C176616

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
George Chianis

Mailing Address 273 Chelmsford St.

City Chelmsford State MA Zip Code 01824

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

Name of Employer GTC Wireless Partners LLC Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2009

Transaction ID: 91022.C176872

Amount of Each Receipt this Period 250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
George Chianis

Mailing Address 273 Chelmsford St.

City Chelmsford State MA Zip Code 01824

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

Name of Employer GTC Wireless Partners LLC Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2009

Transaction ID: 91116.C176910

Amount of Each Receipt this Period 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**

**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 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Salvatore Cirella

Mailing Address 56 East Mall

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
PCR Restaurant Corp. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 12 / 2009

Transaction ID: 91016.C176637

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Gould Coleman

Mailing Address 81 Bickford Hill Rd

City State Zip Code  
Gardner MA 01440

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2009

Transaction ID: 91016.C176646

Amount of Each Receipt this Period  
50.00

Receipt

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

Mailing Address 24 Westwood Rd

City State Zip Code  
North Falmouth MA 02556

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2009

Transaction ID: 91016.C176689

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

**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 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Nathan Couch

Mailing Address 5 High Rock Rd.

City State Zip Code  
Dover MA 02030

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 ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C176468

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Nathan Couch

Mailing Address 5 High Rock Rd.

City State Zip Code  
Dover MA 02030

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 ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 9

Transaction ID: 91016.C176659

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
George Davis

Mailing Address 110 Industrial Dr

City State Zip Code  
Holden MA 01520

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

Name of Employer Inner-tite Corp. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 9

Transaction ID: 91021.C176823

Amount of Each Receipt this Period  
250.00

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 14 / 66  
(check only one)

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
Tanya DeGenova

Mailing Address 13 Taft St.

City State Zip Code  
Marblehead MA 01945

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

Name of Employer Occupation  
TSD Security Consulting Security Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 572.00

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2009

**Transaction ID:** 91116.C176920

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 128 Boston Post Road

City State Zip Code  
Wayland MA 01778

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

Name of Employer Occupation  
Self Employed Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2009

**Transaction ID:** 91116.C176876

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jay Forrester

Mailing Address 80 Deaconess Road  
Suite 442

City State Zip Code  
Concord MA 01742

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2009

**Transaction ID:** 91016.C176475

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

**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 / 66  
(check only one)

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

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

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

**A.**

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

Mailing Address 117 School St

City State Zip Code  
Manchester MA 01944

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 ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2009

Transaction ID: 91016.C176473

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Lucie Gadenne

Mailing Address 1 Abernathy St.

City State Zip Code  
Marblehead MA 01945

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
10 / 13 / 2009

Transaction ID: 91016.C176625

Amount of Each Receipt this Period  
50.00

Receipt

**C.**

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

Mailing Address 144 Freedom St.

City State Zip Code  
Hopedale MA 01747

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 ▼ 1350.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2009

Transaction ID: 91016.C176595

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**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 / 66

(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Steve Garfinkle

Mailing Address 15 Marlborough St.

City State Zip Code  
Boston MA 02116

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

Name of Employer Occupation  
None none

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

Transaction ID: 91116.C176884

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Charles George

Mailing Address P.O. Box 25

City State Zip Code  
Holbrook MA 02343

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

Name of Employer Occupation  
Self Employed Attorney

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C176480

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Herbert Grover

Mailing Address 330 Main St.

City State Zip Code  
Rowley MA 01969

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

Name of Employer Occupation  
Jacobs Technology Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: 91116.C176901

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 17 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
June Hatfield

Mailing Address 11 April Lane

City Lexington State MA Zip Code 02421

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: 91116.C176878

Amount of Each Receipt this Period: 250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Bernhard Heersink

Mailing Address 281 High Street

City Newburyport State MA Zip Code 01950

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 ▼ 385.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: 91016.C176734

Amount of Each Receipt this Period: 100.00

Receipt

**C.**

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

Mailing Address 85 Sparks St.

City Cambridge State MA Zip Code 02138

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

Name of Employer Greylock Management Occupation Venture Capital

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: 91116.C176875

Amount of Each Receipt this Period: 5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5350.00**

**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 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Brian Herr

Mailing Address 31 Elizabeth Rd.

City State Zip Code  
Hopkinton MA 01748

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

Name of Employer Occupation  
Westco Distribution Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2009

Transaction ID: 91022.C176874

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Richard Hersum

Mailing Address 69 Aberdeen Road

City State Zip Code  
Weston MA 02493

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

Name of Employer Occupation  
AAI Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2009

Transaction ID: 91116.C176919

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Lewis Hicks

Mailing Address 40 Dune Drive

City State Zip Code  
Chatham MA 02633-2519

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2009

Transaction ID: 91016.C176477

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**

**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 19 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Edwin Hines

Mailing Address 60 Bowie Rd.

City State Zip Code  
Marblehead MA 01945

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: 91116.C176909

Amount of Each Receipt this Period  
250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Lorraine Hodsdon

Mailing Address 45 North St.  
Apt. 55

City State Zip Code  
Stoneham MA 02180

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C176470

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

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

Mailing Address 165 Herrick Road

City State Zip Code  
Boxford MA 01921

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 9

Transaction ID: 91022.C176873

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Stephen Jeffries  
 Mailing Address 12 Brimmer St.  
 City Boston State MA Zip Code 02108-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.B. Jeffries Consultants Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64  
 Date of Receipt 10 / 13 / 2009  
**Transaction ID:** 91016.C176628  
 Amount of Each Receipt this Period 208.33  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jose Jorge  
 Mailing Address 118 Inman Street Apt.1  
 City Cambridge State MA Zip Code 02139  
 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 ▼ 270.00  
 Date of Receipt 10 / 13 / 2009  
**Transaction ID:** 91016.C176619  
 Amount of Each Receipt this Period 80.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Arthur Kalotkin  
 Mailing Address 32 Claflin Rd.  
 City Brookline State MA Zip Code 02445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation real estate management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00  
 Date of Receipt 10 / 07 / 2009  
**Transaction ID:** 91016.C176481  
 Amount of Each Receipt this Period 75.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 363.33  
**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 21 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Jason Kauppi  
Mailing Address P.O. Box 152  
City Groton State MA Zip Code 01472  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kauppi Communications Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 295.00  
Date of Receipt 10 / 09 / 2009  
Transaction ID: 91016.C176511  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Amy Kelly  
Mailing Address 157 Rice Road  
City Quincy State MA Zip Code 02170  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Photographer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4135.00  
Date of Receipt 10 / 27 / 2009  
Transaction ID: 91116.C177107  
Amount of Each Receipt this Period 850.00  
In-Kind  
In-Kind donation of photography services for party related e

**C.** Full Name (Last, First, Middle Initial)  
Michael Kennealy  
Mailing Address 4 Brent Rd.  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Spectrum Equity Occupation Managing Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 10 / 19 / 2009  
Transaction ID: 91021.C176780  
Amount of Each Receipt this Period 3470.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4420.00  
**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 22 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Kershaw		Date of Receipt
	Mailing Address 84 Beacon St.		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Boston	MA	02108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91016.C176776
Name of Employer Hampshire House Restaurant		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
		<input type="text" value="600.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) James Knott		Date of Receipt
	Mailing Address 456 Hill Street		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Whitinsville	MA	01588
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91116.C176925
Name of Employer Riverdale Mills Corporation		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Paige Kohler		Date of Receipt
	Mailing Address 3 Stonewall Rd.		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lexington	MA	02421
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91116.C176917
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1050.00"/>
<b>TOTAL</b> 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 23 / 66  
(check only one)

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

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)  
Henry Kulik

Mailing Address 100 Erdman Way  
Suite S-100

City Leominster State MA Zip Code 01453

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

Name of Employer Henry Kulik Jr CPA LLC Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2009

Transaction ID: 91021.C176782

Amount of Each Receipt this Period 1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Julianne Lindsay

Mailing Address 81 Channing Rd

City Watertown State MA Zip Code 02472

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

Name of Employer Eastern Bank Occupation banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 07 / 2009

Transaction ID: 91016.C176462

Amount of Each Receipt this Period 100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Merrill Mack

Mailing Address 24 Terrace Rd.

City Weston State MA Zip Code 02493

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 ▼ 300.00

Date of Receipt 10 / 09 / 2009

Transaction ID: 91016.C176599

Amount of Each Receipt this Period 150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 66  
(check only one)

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

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

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

**A.**

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

Mailing Address 89 Countryside Lane

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 ▼ 250.00

Date of Receipt 10 / 31 / 2009

Transaction ID: 91116.C176908

Amount of Each Receipt this Period 250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Holt Massey

Mailing Address 85 Merrimac Street

City Boston State MA Zip Code 02114

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

Name of Employer Massey & Co., LLC Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5250.00

Date of Receipt 10 / 09 / 2009

Transaction ID: 91016.C176569

Amount of Each Receipt this Period 5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Leonard Matz

Mailing Address 41 Belmont Ave

City Feeding Hills (Aga State MA Zip Code 01030

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 10 / 05 / 2009

Transaction ID: 91016.C176409

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5350.00**

**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 25 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Catherine McDonnell

Mailing Address 63 Atlantic Ave #7E

City State Zip Code  
Boston MA 02110

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

Name of Employer Occupation  
The Action Group Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2009

Transaction ID: 91021.C176784

Amount of Each Receipt this Period  
2500.00

Receipt

**B.**

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

Mailing Address 11161 NW 24th Street

City State Zip Code  
Pompano Beach FL 33065

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

Name of Employer Occupation  
The Patron Spirits Company COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 9920.00

Date of Receipt  
MM / DD / YYYY  
10 / 12 / 2009

Transaction ID: 91016.C176636

Amount of Each Receipt this Period  
3800.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Edward Michaud

Mailing Address 12 Highland St.

City State Zip Code  
Weston MA 02493

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

Name of Employer Occupation  
Self Employed Orthodontist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1315.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2009

Transaction ID: 91016.C176476

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6325.00**

**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 26 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Edward Michaud

Mailing Address 12 Highland St.

City State Zip Code  
Weston MA 02493

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

Name of Employer  
Self Employed

Occupation  
Orthodontist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1325.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2009

Transaction ID: 91016.C176613

Amount of Each Receipt this Period  
10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
William Hugh Morton

Mailing Address 1480 Drift Road

City State Zip Code  
Westport MA 02790

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

Name of Employer  
Morton Law Office

Occupation  
Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2009

Transaction ID: 91016.C176513

Amount of Each Receipt this Period  
500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Motte

Mailing Address 19 Brook Street  
PO Box 134

City State Zip Code  
North Carver MA 02355

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

Name of Employer  
Self-Employed

Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2009

Transaction ID: 91016.C176665

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **560.00**

**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 27 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Ann Murphy

Mailing Address 65 Helen Street

City State Zip Code  
Waltham MA 02452

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

Name of Employer Occupation  
GPC/ONeill & Assoc. Vice President, PR Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

Transaction ID: 91116.C176877

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Jo-Ann Nassour

Mailing Address 243 New Hyde Park Road

City State Zip Code  
Garden City NY 11530

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

Name of Employer Occupation  
Self Employed sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 9

Transaction ID: 91021.C176781

Amount of Each Receipt this Period  
76.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Pete Nicholas

Mailing Address 1 Joy Street

City State Zip Code  
Boston MA 02108

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

Name of Employer Occupation  
Boston Scientific Corp. Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: 91116.C176918

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5176.00**

**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 28 / 66  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
S C Prout

Mailing Address 383F Neponset St

City State Zip Code  
Norwood MA 02062-4950

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 ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 9

Transaction ID: 91016.C176687

Amount of Each Receipt this Period  
30.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Dean Rogeness

Mailing Address 22 Warren Terrace

City State Zip Code  
Longmeadow MA 01106

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 ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 9

Transaction ID: 91016.C176647

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Chris Rohan

Mailing Address 86 Jacobs Lane

City State Zip Code  
Norwell MA 02061

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

Name of Employer Fidelity Investments Occupation VP Investment Communication

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91016.C176635

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **630.00**

**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 29 / 66  
(check only one)

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

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

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

**A.**

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

Mailing Address 18 Pond View Road

City Holliston State MA Zip Code 01746-3400

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 10 / 07 / 2009

Transaction ID: 91016.C176469

Amount of Each Receipt this Period 100.00

Receipt

**B.**

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

Mailing Address 2 Blacksmith Rd

City Chelmsford State MA Zip Code 01824

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 ▼ 400.00

Date of Receipt 10 / 07 / 2009

Transaction ID: 91016.C176474

Amount of Each Receipt this Period 200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Simoneau

Mailing Address 11 Ship St

City Newburyport State MA Zip Code 01950

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 10 / 16 / 2009

Transaction ID: 91016.C176743

Amount of Each Receipt this Period 200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

**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 30 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
James Sinnott

Mailing Address 8 Nobska Way

City State Zip Code  
Wareham MA 02571

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

Name of Employer Occupation  
Dept of Homeland Security Special Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2009

**Transaction ID:** 91016.C176404

Amount of Each Receipt this Period  
110.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Sivoletta

Mailing Address 85 Monadnock Rd.

City State Zip Code  
Wellesley MA 02481

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

Name of Employer Occupation  
Columbia University Academic

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1675.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2009

**Transaction ID:** 91016.C176509

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lois Stebbins

Mailing Address 67 Dover Rd.

City State Zip Code  
Longmeadow MA 01106

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 155.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2009

**Transaction ID:** 91016.C176565

Amount of Each Receipt this Period  
55.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **415.00**

**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 31 / 66  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Lois Stebbins  
Mailing Address 67 Dover Rd.  
City State Zip Code  
Longmeadow MA 01106  
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 ▼ 210.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 9  
Transaction ID: 91021.C176858  
Amount of Each Receipt this Period 55.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Gilbert Steward  
Mailing Address 137 Larch Row  
City State Zip Code  
Wenham MA 01984  
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 ▼ 4250.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 9  
Transaction ID: 91016.C176641  
Amount of Each Receipt this Period 250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Patricia Tucker  
Mailing Address 4 Sturbridge Rd.  
City State Zip Code  
Wellesley MA 02481  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation At home  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9  
Transaction ID: 91116.C176912  
Amount of Each Receipt this Period 200.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 505.00  
**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 32 / 66

(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Claudia Viglione

Mailing Address 4 Canal Park  
Apt 305

City State Zip Code  
Cambridge MA 02141-2209

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

Name of Employer Occupation  
Boston Culinary Group Payroll Administrator

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C176488

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Brad Williams

Mailing Address 29 Furbush Road

City State Zip Code  
Boston MA 02132

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 358.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: 91116.C176903

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
George Young

Mailing Address 235 Walker St. Apt 252

City State Zip Code  
Lenox MA 01240

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 9

Transaction ID: 91016.C176778

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

**375.00**

**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 33 / 66  
(check only one)

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

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

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

A.

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

Mailing Address 8 Childs Rd

City State Zip Code  
Lexington MA 02421

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: 91016.C176562

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	40369.33

# 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 / 66

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

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

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

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 91116.E11693 Date of Disbursement 10 / 30 / 2009
	Mailing Address 104 Canal Street	Amount of Each Disbursement this Period 41.85
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 91116.E11694 Date of Disbursement 10 / 30 / 2009
	Mailing Address 104 Canal Street	Amount of Each Disbursement this Period 6.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

C.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts	Transaction ID: 91116.E11667 Date of Disbursement 10 / 22 / 2009
	Mailing Address Landmark Center 401 Park Drive	Amount of Each Disbursement this Period 148.31
	City Boston State MA Zip Code 02215-	
	Purpose of Disbursement Health Insurance 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) ▼
		HEALTH INSURANCE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	196.16
<b>TOTAL</b> 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

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) Boston Harbor Hotel	Transaction ID: 91116.E11650 Date of Disbursement 10 / 22 / 2009
	Mailing Address 70 Rowes Wharf	Amount of Each Disbursement this Period 5964.55
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Catering for party related fundraising event	CATERING FOR PARTY RELATED FUNDRAISING EVENT
	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) Boston Harbor Hotel	Transaction ID: 91116.E11641 Date of Disbursement 10 / 29 / 2009
	Mailing Address 70 Rowes Wharf	Amount of Each Disbursement this Period 1314.48
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Catering for party related fundraising event	CATERING FOR PARTY RELATED FUNDRAISING EVENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 91116.E11669 Date of Disbursement 10 / 22 / 2009
	Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 110.00
	City Hanover State MA Zip Code 02339-	
	Purpose of Disbursement Party related website development	PARTY RELATED WEBSITE DEVELOPMENT
	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) ..... ▶

7389.03

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Css Castle Self-Storage Mailing Address 39 Old Colony Ave. City Boston State MA Zip Code 02127- Purpose of Disbursement Rent for Storage Unit 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: 91116.E11670 Date of Disbursement 10 / 22 / 2009
	Amount of Each Disbursement this Period 49.35 Category/Type RENT FOR STORAGE UNIT

<b>B.</b> Full Name (Last, First, Middle Initial) Kauppi Communications Mailing Address 27 Townly Road City Watertown State MA Zip Code 02472- Purpose of Disbursement Communications Consulting Fee - party related 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: 91116.E11664 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 3000.00 Category/Type COMMUNICATIONS CONSULTING FEE - PARTY RELATED NON FEA

<b>C.</b> Full Name (Last, First, Middle Initial) FLS Connect Mailing Address 7300 Hudson Blvd. Ste City Saint Paul State MN Zip Code 55128- Purpose of Disbursement party related telemarket fundraising 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: 91116.E11632 Date of Disbursement 10 / 02 / 2009
	Amount of Each Disbursement this Period 2248.95 Category/Type PARTY RELATED TELEMARKE FUNDRAISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5298.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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

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) FLS Connect	Transaction ID: 91116.E11663 Date of Disbursement 10 / 15 / 2009
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 1548.65
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement party related telemarket fundraising 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) ▼
		PARTY RELATED TELEMARKE FUNDRAISING

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91116.E11690 Date of Disbursement 10 / 29 / 2009
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 3243.20
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement party related telemarket fundraising 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) ▼
		PARTY RELATED TELEMARKE FUNDRAISING

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91116.E11681 Date of Disbursement 10 / 29 / 2009
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 3679.00
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement Payment of debt for party related telemarket fundraising 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) ▼
		PAYMENT OF DEBT FOR PARTY RELATED TELEMARKE FUNDRAISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8470.85
<b>TOTAL</b> 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

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) Nick Connors	Transaction ID: 91116.E11695 Date of Disbursement 10 / 02 / 2009
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 361.00
	City Stoneham State MA Zip Code 02180-	
	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) Css Castle Self-Storage	Transaction ID: 91116.E11696 Date of Disbursement 10 / 02 / 2009
	Mailing Address 39 Old Colony Ave.	Amount of Each Disbursement this Period 361.00
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement N. Connors reimbursement for rent on storage 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: N. CONNORS REIMBURSEMENT FOR RENT ON STORAGE

C.	Full Name (Last, First, Middle Initial) Keswick Consulting	Transaction ID: 91116.E11675 Date of Disbursement 10 / 22 / 2009
	Mailing Address 231 Victory Road	Amount of Each Disbursement this Period 3000.00
	City Quincy State MA Zip Code 02171-	
	Purpose of Disbursement Political Consulting Fee - party related 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) ▼
		POLITICAL CONSULTING FEE - PARTY RELATED NON FEA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3361.00
<b>TOTAL</b> 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

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) Copy Cop	Transaction ID: 91116.E11631 Date of Disbursement 10 / 02 / 2009
	Mailing Address 12 Channel St.	Amount of Each Disbursement this Period 544.93
	City Boston State MA Zip Code 02210-	
	Purpose of Disbursement Postage for invitations party related non-fea	POSTAGE FOR INVITATIONS PARTY RELATED 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) ▼	

B.	Full Name (Last, First, Middle Initial) Copy Cop	Transaction ID: 91116.E11629 Date of Disbursement 10 / 02 / 2009
	Mailing Address 12 Channel St.	Amount of Each Disbursement this Period 1909.84
	City Boston State MA Zip Code 02210-	
	Purpose of Disbursement Printing for Invitations party related non-fea	PRINTING FOR INVITATIONS PARTY RELATED 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) ▼	

C.	Full Name (Last, First, Middle Initial) Copy Cop	Transaction ID: 91116.E11638 Date of Disbursement 10 / 09 / 2009
	Mailing Address 12 Channel St.	Amount of Each Disbursement this Period 355.93
	City Boston State MA Zip Code 02210-	
	Purpose of Disbursement Printing for envelopes party related non-fea	PRINTING FOR ENVELOPES PA- RTY RELATED 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2810.70</b>
<b>TOTAL</b> 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

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) Vincent DeVito	Transaction ID: 91116.E11704 Date of Disbursement 10 / 01 / 2009
	Mailing Address One Longfellow Place, #2018	Amount of Each Disbursement this Period 219.20
	City Boston State MA Zip Code 02114-	
	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) US AIRWAYS US AIRWAYS	Transaction ID: 91116.E11707 Date of Disbursement 10 / 01 / 2009
	Mailing Address Logan Airport	Amount of Each Disbursement this Period 219.20
	City Boston State MA Zip Code 02128-	
	Purpose of Disbursement V.Devito Reimbursement for airfare 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: V.DEVITO REIMBURSEM-ENT FOR AIRFARE

C.	Full Name (Last, First, Middle Initial) Vincent DeVito	Transaction ID: 91116.E11706 Date of Disbursement 10 / 01 / 2009
	Mailing Address One Longfellow Place, #2018	Amount of Each Disbursement this Period 132.13
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement Reimbursement for parking food and travel 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 FOR PARKING FOOD AND TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>351.33</b>
<b>TOTAL</b> 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

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) Vincent DeVito	Transaction ID: 91116.E11705 Date of Disbursement 10 / 01 / 2009
	Mailing Address One Longfellow Place, #2018	Amount of Each Disbursement this Period 280.12
	City Boston State MA Zip Code 02114-	
	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) DC Courtyard Marriot	Transaction ID: 91116.E11709 Date of Disbursement 10 / 01 / 2009
	Mailing Address 1900 Connecticut Ave NW	Amount of Each Disbursement this Period 280.12
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement V. Devito reimbursement for hotel 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: V. DEVITO REIMBURSEMENT FOR HOTEL

C.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 91116.E11671 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 60036	Amount of Each Disbursement this Period 50.41
	City Los Angeles State CA Zip Code 90060-0036	
	Purpose of Disbursement Cable 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) ▼
		CABLE SERVICE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	330.53
<b>TOTAL</b> 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

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) Tarah Donoghue	Transaction ID: 91116.E11697 Date of Disbursement 10 / 01 / 2009
	Mailing Address 3 Main Street	Amount of Each Disbursement this Period 269.90
	City Dover State MA Zip Code 02030- 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) AlphaGraphics AlphaGraphics	Transaction ID: 91116.E11698 Date of Disbursement 10 / 01 / 2009
	Mailing Address 74 Canal Street	Amount of Each Disbursement this Period 269.90
	City Boston State MA Zip Code 02114- Purpose of Disbursement T. Donoghue Reimbursement for party related banner 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: T. DONOGHUE REIMBURSEMENT FOR PARTY RELATED BANNER

C.	Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)	Transaction ID: 91116.E11662 Date of Disbursement 10 / 15 / 2009
	Mailing Address PO Box 371461	Amount of Each Disbursement this Period 207.65
	City Pittsburgh State PA Zip Code 15250- Purpose of Disbursement Express Mail 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) ▼	EXPRESS MAIL

SUBTOTAL of Disbursements This Page (optional) ..... ▶

477.55

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

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) Federal Express (Fed Ex)	Transaction ID: 91116.E11672 Date of Disbursement																			
	Mailing Address PO Box 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	2	/	2	0	0	9												
	City Pittsburgh State PA Zip Code 15250-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Express Mail	<table border="1"><tr><td>150.06</td></tr></table>	150.06																		
150.06																					
	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) ▼																			
		EXPRESS MAIL																			

B.	Full Name (Last, First, Middle Initial) Guardian Guardian	Transaction ID: 91116.E11615 Date of Disbursement																			
	Mailing Address Boston Group Office 1 Liberty Square	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	1	/	2	0	0	9												
	City Boston State MA Zip Code 02109-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dental Insurance	<table border="1"><tr><td>129.93</td></tr></table>	129.93																		
129.93																					
	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) ▼																			
		DENTAL INSURANCE																			

C.	Full Name (Last, First, Middle Initial) Hampshire House	Transaction ID: 91116.E11623 Date of Disbursement																			
	Mailing Address 84 Beacon St.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	1	/	2	0	0	9												
	City Boston State MA Zip Code 02108-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Deposit for Room Rental and Catering for Fundraiser Party Related - Non FEA	<table border="1"><tr><td>461.75</td></tr></table>	461.75																		
461.75																					
	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) ▼																			
		DEPOSIT FOR ROOM RENTAL AND CATERING FOR FUNDRAISER PARTY RELATED - NON FEA																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>741.74</td></tr></table>	741.74
741.74		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Hampshire House Mailing Address 84 Beacon St. City Boston State MA Zip Code 02108- Purpose of Disbursement Catering for party-related fundraising event 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: 91116.E11651 Date of Disbursement 10 / 22 / 2009
	Amount of Each Disbursement this Period 246.87 CATERING FOR PARTY-RELATED FUNDRAISING EVENT

<b>B.</b> Full Name (Last, First, Middle Initial) Political Ink Inc Mailing Address Martin Baker 2924 Bells Road City Richmond State VA Zip Code 23234- Purpose of Disbursement Printing for party related fundraising brochure 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: 91116.E11646 Date of Disbursement 10 / 29 / 2009
	Amount of Each Disbursement this Period 2012.50 PRINTING FOR PARTY RELATED FUNDRAISING BROCHURE

<b>C.</b> Full Name (Last, First, Middle Initial) Lyndsay Jones Mailing Address 16 Oval Road City Quincy State MA Zip Code 02170- Purpose of Disbursement L. Jones reimbursement for parking food and travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91116.E11634 Date of Disbursement 10 / 02 / 2009
	Amount of Each Disbursement this Period 74.98 L. JONES REIMBURSEMENT FOR PARKING FOOD AND TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2334.35
<b>TOTAL</b> 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 45 / 66

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

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Lyndsay Jones</p> <p>Mailing Address 16 Oval Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement L. Jones reimbursement for parking food and travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91116.E11645</p> <p>Date of Disbursement 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 51.42</p> <p>L. JONES REIMBURSEMENT FOR PARKING FOOD AND TRAVEL</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Susan Keene</p> <p>Mailing Address 76 Locksley Rd.</p> <p>City Lynnfield State MA Zip Code 01940-</p> <p>Purpose of Disbursement accounting services</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><b>Transaction ID:</b> 91116.E11682</p> <p>Date of Disbursement 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1014.50</p> <p>ACCOUNTING SERVICES</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Amy Kelly</p> <p>Mailing Address 157 Rice Road</p> <p>City Quincy State MA Zip Code 02170-</p> <p>Purpose of Disbursement In-Kind donation of photography services for party related event</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><b>Transaction ID:</b> 91116.C177107IK</p> <p>Date of Disbursement 10 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 850.00</p> <p>IN KIND: IN-KIND DONATION OF PHOTOGRAPHY SERVICES FOR PARTY RELATED EVENT</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1915.92</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**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

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) Merchants Bankcard	Transaction ID: 91116.E11628 Date of Disbursement 10 / 02 / 2009
	Mailing Address Fleet Bank 100 Federal Street	Amount of Each Disbursement this Period 652.80
	City Boston State MA Zip Code 02110-	
	Purpose of Disbursement Credit Card Fee	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) ▼
		CREDIT CARD FEE

B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems	Transaction ID: 91116.E11633 Date of Disbursement 10 / 02 / 2009
	Mailing Address P.O. Box 7247-0322	Amount of Each Disbursement this Period 963.43
	City Philadelphia State PA Zip Code 19170-0322	
	Purpose of Disbursement Payment of Debt for printed copies party related	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) ▼
		PAYMENT OF DEBT FOR PRINT- ED COPIES PARTY RELATED

C.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems	Transaction ID: 91116.E11674 Date of Disbursement 10 / 22 / 2009
	Mailing Address P.O. Box 7247-0322	Amount of Each Disbursement this Period 1218.38
	City Philadelphia State PA Zip Code 19170-0322	
	Purpose of Disbursement Copier Equipment Lease	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) ▼
		COPIER EQUIPMENT LEASE

SUBTOTAL of Disbursements This Page (optional) ..... ▶

2834.61

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

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) Jennifer Nassour	Transaction ID: 91116.E11699 Date of Disbursement 10 / 01 / 2009
	Mailing Address 49 Chelsea St., Unit C1-307	Amount of Each Disbursement this Period 709.20
	City Boston State MA Zip Code 02129-	
	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) Jet Blue Airlines	Transaction ID: 91116.E11700 Date of Disbursement 10 / 01 / 2009
	Mailing Address P.O. Box 17435	Amount of Each Disbursement this Period 709.20
	City Salt Lake City State UT Zip Code 84117-	
	Purpose of Disbursement J. Nassour Reimbursement for airfare 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: J. NASSOUR REIMBURSEMENT FOR AIRFARE

C.	Full Name (Last, First, Middle Initial) Jennifer Nassour	Transaction ID: 91116.E11702 Date of Disbursement 10 / 22 / 2009
	Mailing Address 49 Chelsea St., Unit C1-307	Amount of Each Disbursement this Period 280.00
	City Boston State MA Zip Code 02129-	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	989.20
<b>TOTAL</b> 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

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) Suffolk Superior Court	Transaction ID: 91116.E11711 Date of Disbursement 10 / 22 / 2009
	Mailing Address Suffolk County Courthouse 14th Flo Three Pemberton Square	Amount of Each Disbursement this Period 280.00
	City: Boston State: MA Zip Code: 02108-	
	Purpose of Disbursement J. Nassour Reimbursement for court filing	[MEMO ITEM] MEMO: J. NASSOUR REIMBURSEMENT FOR COURT FILING
	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) Jennifer Nassour	Transaction ID: 91116.E11701 Date of Disbursement 10 / 22 / 2009
	Mailing Address 49 Chelsea St., Unit C1-307	Amount of Each Disbursement this Period 274.25
	City: Boston State: MA Zip Code: 02129-	
	Purpose of Disbursement Reimburesement see below:	REIMBURESEMENT 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) ▼	

C.	Full Name (Last, First, Middle Initial) Verizon Verizon Wireless	Transaction ID: 91116.E11703 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 5029	Amount of Each Disbursement this Period 274.25
	City: Wallingford State: CT Zip Code: 06492-	
	Purpose of Disbursement J. Nassour reimbursement for Cell Phone	[MEMO ITEM] MEMO: J. NASSOUR REIMBURSEMENT FOR CELL PHONE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	274.25
<b>TOTAL</b> 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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114- Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91116.E11625 Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 4434.00 RENT

<b>B.</b> Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114- Purpose of Disbursement Rent and Utilities 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: 91116.E11665 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 4805.34 RENT AND UTILITIES

<b>C.</b> Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114- Purpose of Disbursement Rent and utilities 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: 91116.E11648 Date of Disbursement 10 / 29 / 2009
	Amount of Each Disbursement this Period 4798.15 RENT AND UTILITIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14037.49
<b>TOTAL</b> 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

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) Paychex/InterPay	Transaction ID: 91116.E11622 Date of Disbursement 10 / 01 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 74.16
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Fee 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 FEE

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 91116.E11621 Date of Disbursement 10 / 01 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 2634.45
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Tax 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 TAX

C.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 91116.E11654 Date of Disbursement 10 / 14 / 2009
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 74.16
	City Boston State MA Zip Code 02266-	
	Purpose of Disbursement Payroll Fee 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 FEE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2782.77

**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

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

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

<p><b>A.</b> 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 Tax</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><b>Transaction ID:</b> 91116.E11656 <b>Date of Disbursement:</b> 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2364.84</p> <p><b>PAYROLL TAX</b></p>
<p><b>B.</b> 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 Tax</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><b>Transaction ID:</b> 91116.E11688 <b>Date of Disbursement:</b> 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 2363.35</p> <p><b>PAYROLL TAX</b></p>
<p><b>C.</b> 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 Fee</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><b>Transaction ID:</b> 91116.E11689 <b>Date of Disbursement:</b> 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 81.16</p> <p><b>PAYROLL FEE</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4809.35</b>
<b>TOTAL</b> 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

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) Paypal Paypal	Transaction ID: 91116.E11637 Date of Disbursement 10 / 05 / 2009
	Mailing Address 12312 Port Grace Blvd	Amount of Each Disbursement this Period 30.00
	City La Vista State NE Zip Code 68128-	
	Purpose of Disbursement Credit Card fee	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) ▼
		CREDIT CARD FEE

B.	Full Name (Last, First, Middle Initial) Paypal Paypal	Transaction ID: 91116.E11640 Date of Disbursement 10 / 12 / 2009
	Mailing Address 12312 Port Grace Blvd	Amount of Each Disbursement this Period 128.63
	City La Vista State NE Zip Code 68128-	
	Purpose of Disbursement Credit Card Fee	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) ▼
		CREDIT CARD FEE

C.	Full Name (Last, First, Middle Initial) Paypal Paypal	Transaction ID: 91116.E11666 Date of Disbursement 10 / 19 / 2009
	Mailing Address 12312 Port Grace Blvd	Amount of Each Disbursement this Period 235.43
	City La Vista State NE Zip Code 68128-	
	Purpose of Disbursement Credit Card Fee	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) ▼
		CREDIT CARD FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>394.06</b>
<b>TOTAL</b> 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

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) Paypal Paypal	Transaction ID: 91116.E11692 Date of Disbursement 10 / 30 / 2009
	Mailing Address 12312 Port Grace Blvd	Amount of Each Disbursement this Period 229.95
	City La Vista State NE Zip Code 68128-	
	Purpose of Disbursement Credit Card Fee	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) ▼
		CREDIT CARD FEE

B.	Full Name (Last, First, Middle Initial) Poland Spring Poland Spring	Transaction ID: 91116.E11635 Date of Disbursement 10 / 02 / 2009
	Mailing Address Processing Center PO Box 52271	Amount of Each Disbursement this Period 146.98
	City Phoenix State AZ Zip Code 85072-	
	Purpose of Disbursement Bottled Water	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) ▼
		BOTTLED WATER

C.	Full Name (Last, First, Middle Initial) Poland Spring Poland Spring	Transaction ID: 91116.E11676 Date of Disbursement 10 / 22 / 2009
	Mailing Address Processing Center PO Box 52271	Amount of Each Disbursement this Period 55.81
	City Phoenix State AZ Zip Code 85072-	
	Purpose of Disbursement Bottled Water	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) ▼
		BOTTLED WATER

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	432.74
<b>TOTAL</b> 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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Vox Populi Mailing Address 755 Boylston St. City Boston State MA Zip Code 02114- Purpose of Disbursement Food for party related fundraiser 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: 91116.E11691 Date of Disbursement 10 / 29 / 2009
	Amount of Each Disbursement this Period 333.45
	Category/ Type FOOD FOR PARTY RELATED FU- NDRAISER NON-FEA
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>B.</b> Full Name (Last, First, Middle Initial) Boston Postmaster Mailing Address JW MCCORMACK STATION New Chardon Street City Boston State MA Zip Code 02114- Purpose of Disbursement Non-FEA Party Related Postage 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: 91116.E11626 Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 220.00
	Category/ Type NON-FEA PARTY RELATED POS- TAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>C.</b> Full Name (Last, First, Middle Initial) Boston Postmaster Mailing Address JW MCCORMACK STATION New Chardon Street City Boston State MA Zip Code 02114- Purpose of Disbursement non-fea party related postage 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: 91116.E11639 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 150.00
	Category/ Type NON-FEA PARTY RELATED POS- TAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

703.45

**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

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) Boston Postmaster	Transaction ID: 91116.E11677 Date of Disbursement 10 / 22 / 2009
	Mailing Address JW MCCORMACK STATION New Chardon Street	Amount of Each Disbursement this Period 405.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement non-fea party related postage 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) ▼
		NON-FEA PARTY RELATED POSTAGE

B.	Full Name (Last, First, Middle Initial) Mak Productions	Transaction ID: 91116.E11624 Date of Disbursement 10 / 01 / 2009
	Mailing Address 123 Hill Street	Amount of Each Disbursement this Period 352.50
	City Fall River State MA Zip Code 02723-	
	Purpose of Disbursement party related shirts for volunteers - 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) ▼
		PARTY RELATED SHIRTS FOR VOLUNTEERS - NON FEA

C.	Full Name (Last, First, Middle Initial) Sprint/Nextel	Transaction ID: 91116.E11678 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 17990	Amount of Each Disbursement this Period 246.53
	City Denver State CO Zip Code 80217-	
	Purpose of Disbursement Cell 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) ▼
		CELL PHONE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1004.03</b>
<b>TOTAL</b> 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

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) Staples, Inc.	Transaction ID: 91116.E11636 Date of Disbursement 10 / 02 / 2009
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 1600.30
	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) Staples, Inc.	Transaction ID: 91116.E11679 Date of Disbursement 10 / 22 / 2009
	Mailing Address Staples Credit Plan Dept. 80 - 0088936796	Amount of Each Disbursement this Period 1188.09
	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:	

C.	Full Name (Last, First, Middle Initial) Blue Swarm	Transaction ID: 91116.E11668 Date of Disbursement 10 / 22 / 2009
	Mailing Address 70 Broadway	Amount of Each Disbursement this Period 271.42
	City Westford	State MA
	Zip Code 01886-	Category/ Type
	Purpose of Disbursement Website Development party related non-fea	WEBSITE DEVELOPMENT PARTY RELATED NON-FEA
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3059.81</b>
<b>TOTAL</b> 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 57 / 66

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

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement Direct Mail - party related 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: 91116.E11661 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 3666.25 DIRECT MAIL - PARTY RELATED NON FEA

<b>B.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement Direct Mail - party related 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: 91116.E11642 Date of Disbursement 10 / 29 / 2009
	Amount of Each Disbursement this Period 3820.76 DIRECT MAIL - PARTY RELATED NON FEA

<b>C.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement Direct Mail - party related 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: 91116.E11644 Date of Disbursement 10 / 30 / 2009
	Amount of Each Disbursement this Period 690.00 DIRECT MAIL - PARTY RELATED NON FEA

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8177.01
<b>TOTAL</b> 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 58 / 66

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

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

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

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 91116.E11627
	Mailing Address P.O. Box 1	Date of Disbursement 10 / 01 / 2009
	City Worcester State MA Zip Code 01654-	Amount of Each Disbursement this Period 523.48
	Purpose of Disbursement Office Phone Service	OFFICE PHONE SERVICE
	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) Verizon	Transaction ID: 91116.E11680
	Mailing Address P.O. Box 1	Date of Disbursement 10 / 22 / 2009
	City Worcester State MA Zip Code 01654-	Amount of Each Disbursement this Period 520.15
	Purpose of Disbursement Office Phone Service	OFFICE PHONE SERVICE
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1043.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>74219.86</b>

**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 59 / 66

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

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

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

New Hampshire Republican State Committee

Mailing Address 10 Water Street

City State Zip Code  
Concord NH 03301-

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 91116.E11712

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

738.57

SUBTOTAL of Disbursements This Page (optional) .....

738.57

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

738.57

**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

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) Nick Connors	Transaction ID: 91116.E11616 Date of Disbursement 10 / 01 / 2009
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 1938.88
	City Stoneham State MA Zip Code 02180-	
	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) Nick Connors	Transaction ID: 91116.E11655 Date of Disbursement 10 / 15 / 2009
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 1938.87
	City Stoneham State MA Zip Code 02180-	
	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) Nick Connors	Transaction ID: 91116.E11683 Date of Disbursement 10 / 29 / 2009
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 1938.87
	City Stoneham State MA Zip Code 02180-	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5816.62</b>
<b>TOTAL</b> 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

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Tarah Donoghue</p> <p>Mailing Address 3 Main Street</p> <p>City Dover State MA Zip Code 02030-</p> <p>Purpose of Disbursement payroll</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><b>Transaction ID:</b> 91116.E11617</p> <p>Date of Disbursement 10 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 1584.78</p> <p>PAYROLL</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tarah Donoghue</p> <p>Mailing Address 3 Main Street</p> <p>City Dover State MA Zip Code 02030-</p> <p>Purpose of Disbursement payroll</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><b>Transaction ID:</b> 91116.E11657</p> <p>Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1584.79</p> <p>PAYROLL</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Tarah Donoghue</p> <p>Mailing Address 3 Main Street</p> <p>City Dover State MA Zip Code 02030-</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 91116.E11684</p> <p>Date of Disbursement 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1584.78</p> <p>PAYROLL</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4754.35

**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)

PAGE 62 / 66

<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

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) Kaitlyn Greeley	Transaction ID: 91116.E11618 Date of Disbursement 10 / 01 / 2009
	Mailing Address 34 Fresno St.	
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 657.40
	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) Kaitlyn Greeley	Transaction ID: 91116.E11658 Date of Disbursement 10 / 15 / 2009
	Mailing Address 34 Fresno St.	
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 657.37
	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) Kaitlyn Greeley	Transaction ID: 91116.E11685 Date of Disbursement 10 / 29 / 2009
	Mailing Address 34 Fresno St.	
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 657.37
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	1972.14
<b>TOTAL</b> 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

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) Lyndsay Jones	Transaction ID: 91116.E11619 Date of Disbursement 10 / 01 / 2009
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 1315.24
	City Quincy State MA Zip Code 02170-	
	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) Lyndsay Jones	Transaction ID: 91116.E11659 Date of Disbursement 10 / 15 / 2009
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 1315.13
	City Quincy State MA Zip Code 02170-	
	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) Lyndsay Jones	Transaction ID: 91116.E11686 Date of Disbursement 10 / 29 / 2009
	Mailing Address 16 Oval Road	Amount of Each Disbursement this Period 1315.13
	City Quincy State MA Zip Code 02170-	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3945.50
<b>TOTAL</b> 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 64 / 66

<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

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) Brett Kasper	Transaction ID: 91116.E11620 Date of Disbursement 10 / 01 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 236.12
	City Lynn State MA Zip Code 01902-	
	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) Brett Kasper	Transaction ID: 91116.E11660 Date of Disbursement 10 / 15 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 183.66
	City Lynn State MA Zip Code 01902-	
	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) Brett Kasper	Transaction ID: 91116.E11687 Date of Disbursement 10 / 29 / 2009
	Mailing Address 43 Eastern Ave. Apt. 3	Amount of Each Disbursement this Period 183.65
	City Lynn State MA Zip Code 01902-	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	603.43
<b>TOTAL</b> This Period (last page this line number only) .....	▶	17092.04

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		<b>Transaction ID: LS90513.E11275</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		<b>Transaction ID: LS90513.E11276</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		<b>Transaction ID: LS90513.E11277</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1250.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1750.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Konica Minolta Business Systems			Nature of Debt (Purpose): Payment of Debt for printed copies party related
Mailing Address P.O. Box 7247-0322			
City Philadelphia	State PA	ZIP Code 19170-0322	

Outstanding Balance Beginning This Period 963.43		<b>Transaction ID:</b> LS91116.E11633	
Amount Incurred This Period 0.00	Payment This Period 963.43	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> FLS Connect			Nature of Debt (Purpose): Payment of debt for party related telemarket fundraising
Mailing Address 7300 Hudson Blvd. Ste			
City Saint Paul	State MN	ZIP Code 55128-	

Outstanding Balance Beginning This Period 3679.00		<b>Transaction ID:</b> LS91116.E11681	
Amount Incurred This Period 0.00	Payment This Period 3679.00	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>2) TOTALS</b> This Period (last page this line number only).....	1750.00
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	1750.00