

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Massachusetts Republican State Congressional Committee

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

2. **FEC IDENTIFICATION NUMBER** C00042622
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day Post -Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 01 31 2010

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

Type or Print Name of Treasurer Brent Andersen

Signature of Treasurer Electronically Filed by Brent Andersen Date 02 20 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		80412.05
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	80412.05									
(c) Total Receipts (from Line 19)	965090.00	965090.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1045502.05	1045502.05								
7. Total Disbursements (from Line 31)	698187.95	698187.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	347314.10	347314.10								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	5660.20									

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
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	97109.00	97109.00
(ii) Unitemized	10375.00	10375.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	107484.00	107484.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	117484.00	117484.00
12. Transfers From Affiliated/Other Party Committees	847606.00	847606.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	965090.00	965090.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	965090.00	965090.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	62943.71	62943.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	62943.71	62943.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	629538.00	629538.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	5706.24	5706.24
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	5706.24	5706.24
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	698187.95	698187.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	698187.95	698187.95

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)	117484.00	117484.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	117484.00	117484.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	62943.71	62943.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	62943.71	62943.71

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

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

FOR LINE NUMBER: PAGE 6 / 42
(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)
Born Pac Battle

Mailing Address PO Box 370386

City State Zip Code
Las Vegas NV 89137-8

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2010

Transaction ID: 00129.C177993

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Martin Begien

Mailing Address 407 Warren Street

City State Zip Code
Brookline MA 02445

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: 00129.C177966

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
George Berry

Mailing Address 133 Weston Rd.

City State Zip Code
Lincoln MA 01773

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 13 / 2010

Transaction ID: 00129.C177862

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **7000.00**

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 7 / 42
(check only one)

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

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

A.

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

Mailing Address 60 Swan Road

City Winchester State MA Zip Code 01890

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

Name of Employer Coldwell Banker Occupation Real Estate Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 14 / 2010
Transaction ID: 00129.C177911
Amount of Each Receipt this Period 1000.00
Receipt

B.

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

Mailing Address 61 Azalea Road

City Sharon State MA Zip Code 02067

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 01 / 28 / 2010
Transaction ID: 00129.C178004
Amount of Each Receipt this Period 250.00
Receipt

C.

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

Mailing Address 9 Jackson Pond

City Dedham State MA Zip Code 02026

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 ▼ 500.00

Date of Receipt 01 / 13 / 2010
Transaction ID: 00129.C177861
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 42
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Nelson Burbank

Mailing Address 24 Juniper Circle

City State Zip Code
Reading MA 01867

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: 00129.C177940

Amount of Each Receipt this Period
1000.00

Receipt

B.

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: 00129.C177947

Amount of Each Receipt this Period
500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Bluegrass Committee

Mailing Address A Multi-Candidate Committee
400 N. Capitol St. NW #585

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
PAC Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2010

Transaction ID: 00129.C177743

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **6500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

<p>A. Full Name (Last, First, Middle Initial) Michael Cronin</p> <p>Mailing Address 72 Cliff Rd.</p> <p>City State Zip Code Weston MA 02493</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Weston Presidio</p> <p>Occupation Venture Capitalist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 01 / 08 / 2010</p> <p>Transaction ID: 00129.C177740</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Michael Cronin</p> <p>Mailing Address 72 Cliff Rd.</p> <p>City State Zip Code Weston MA 02493</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Weston Presidio</p> <p>Occupation Venture Capitalist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15000.00</p>	<p>Date of Receipt 01 / 08 / 2010</p> <p>Transaction ID: 00129.C177741</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) James Davis</p> <p>Mailing Address 48 SARGENT ST</p> <p>City State Zip Code Newton MA 02458</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer New Balance Shoes</p> <p>Occupation Chairman</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 01 / 27 / 2010</p> <p>Transaction ID: 00129.C177968</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	20000.00
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 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kevin Delbridge
Mailing Address 10 Andrea Drive
City State Zip Code
Hopkinton MA 01748
FEC ID number of contributing federal political committee. **C**
Name of Employer Harborvest Partners Occupation Financial Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 01 / 27 / 2010
Transaction ID: 00129.C177951
Amount of Each Receipt this Period 10000.00
Receipt

B. Full Name (Last, First, Middle Initial)
John Dematteo
Mailing Address 30 ALBION ROAD
City State Zip Code
Wellesley MA 02481
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 ▼ 1200.00
Date of Receipt 01 / 27 / 2010
Transaction ID: 00129.C177969
Amount of Each Receipt this Period 1200.00
Receipt

C. Full Name (Last, First, Middle Initial)
Walter Donovan
Mailing Address 151 Tremont Street Apt. 6F
City State Zip Code
Boston MA 02111
FEC ID number of contributing federal political committee. **C**
Name of Employer Fidelity Investments Occupation Investments
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 01 / 27 / 2010
Transaction ID: 00129.C177949
Amount of Each Receipt this Period 10000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 21200.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John Fitzpatrick

Mailing Address PO Box 954
9 Prospect Hill Road

City State Zip Code
Stockbridge MA 01262

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

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

Transaction ID: 00129.C177952

Amount of Each Receipt this Period
5000.00

Receipt

B. 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt

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

Transaction ID: 00129.C177967

Amount of Each Receipt this Period
1200.00

Receipt

C. Full Name (Last, First, Middle Initial)
M. Dozier Gardner

Mailing Address 100 Upland Road

City State Zip Code
Brookline MA 02445

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	1	0

Transaction ID: 00129.C177913

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

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

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FOR LINE NUMBER: PAGE 12 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Gerard Guillemette

Mailing Address 458 McDonnel Road

City Alameda State CA Zip Code 94502

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 ▼ 203.00

Date of Receipt 01 / 30 / 2010
Transaction ID: 00217.C178022
Amount of Each Receipt this Period 203.00
Receipt

B. Full Name (Last, First, Middle Initial)
Gerard Guillemette

Mailing Address 458 McDonnel Road

City Alameda State CA Zip Code 94502

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 ▼ 306.00

Date of Receipt 01 / 30 / 2010
Transaction ID: 00217.C178056
Amount of Each Receipt this Period 103.00
Receipt

C. Full Name (Last, First, Middle Initial)
Gerard Guillemette

Mailing Address 458 McDonnel Road

City Alameda State CA Zip Code 94502

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 ▼ 509.00

Date of Receipt 01 / 30 / 2010
Transaction ID: 00217.C178055
Amount of Each Receipt this Period 203.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 509.00

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 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Glenn Harned

Mailing Address 11644 Crest Maple Drive

City State Zip Code
Woodbridge VA 22192

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2010

Transaction ID: 00217.C178014

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Miles Herter

Mailing Address 12 Boardman Ave.

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 ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2010

Transaction ID: 00129.C177774

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 4 Beacon St.

City State Zip Code
Mattapoisett MA 02739

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2010

Transaction ID: 00129.C177995

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1450.00

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 / 42

(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)

Janet Jenney

Mailing Address 4 Beacon Street

City State Zip Code
Mattapoisett MA 02739

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

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

Transaction ID: 00129.C177946

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

P Andrews McLane

Mailing Address 77 Dean Rd

City State Zip Code
Weston MA 02493

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

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

Transaction ID: 00129.C177950

Amount of Each Receipt this Period
10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Morey

Mailing Address 15 Smith Rd

City State Zip Code
Milton MA 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 ▼ 500.00

Date of Receipt

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

Transaction ID: 00129.C177857

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10700.00

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 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
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 Occupation
Morton Law Office Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2010

Transaction ID: 00129.C177745

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Paul Nekoranik

Mailing Address 20 Austin Road

City State Zip Code
Morrisville PA 19067

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2010

Transaction ID: 00217.C178021

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
The Alamo PAC

Mailing Address 816 Congress Ave
Suite 960

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation
Information Requested PAC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2010

Transaction ID: 00129.C177916

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **6000.00**

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 / 42
(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)
Frank Pedlow

Mailing Address 23 Ridgeway Lane

City State Zip Code
Boston MA 02114

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
MM / DD / YYYY
01 / 30 / 2010

Transaction ID: 00217.C178007

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
William Phinizy

Mailing Address 9719 Ridgeway Drive

City State Zip Code
Gig Harbor WA 98332

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2010

Transaction ID: 00217.C178012

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Arthur Ryan

Mailing Address 119 Mt. Pleasant Ave.

City State Zip Code
Gloucester MA 01930

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2010

Transaction ID: 00129.C177914

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Barbara Schadt
Mailing Address 17 OWENOKE PARK
City State Zip Code
Westport CT 06880
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 01 / 27 / 2010
Transaction ID: 00129.C177965
Amount of Each Receipt this Period 10000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Richard Sotell
Mailing Address 31 Lathrop Road
City State Zip Code
Wellesley MA 02482
FEC ID number of contributing federal political committee. **C**
Name of Employer Kraematon Group Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 14 / 2010
Transaction ID: 00129.C177912
Amount of Each Receipt this Period 1000.00
Receipt

C. 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 ▼ 1000.00
Date of Receipt 01 / 27 / 2010
Transaction ID: 00129.C177964
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 12000.00
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 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
D. Bradford Wetherell

Mailing Address 47 Fresh Pond Ln.

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Romney for President Policy Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2010

Transaction ID: 00129.C177981

Amount of Each Receipt this Period
300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Constance V R White

Mailing Address 68 Beacon St.

City State Zip Code
Boston MA 02108

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: 00129.C177938

Amount of Each Receipt this Period
250.00

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: 00129.C177948

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

TOTAL This Period (last page this line number only) ▶ **97109.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 19 / 42	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Daniel Anderson		Date of Receipt
	Mailing Address PO Box 625		<input type="text" value="01"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City	State	Zip Code
	Rehoboth Beach	DE	19971
	FEC ID number of contributing federal political committee.		Transaction ID: 00129.C177859
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="10000.00"/>	Receipt
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

**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 20 / 42
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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) Republican National Committee	Date of Receipt MM / DD / YYYY 01 / 14 / 2010
	Mailing Address 310 First Street SE PO Box 77416	Transaction ID: 00129.C177919
	City Washington State DC Zip Code 20003-	Amount of Each Receipt this Period 3856.00
	FEC ID number of contributing federal political committee. C C00003418	Transfers From Affil./Auth.
	Name of Employer Political Committee Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3856.00	

B.	Full Name (Last, First, Middle Initial) Republican National Committee	Date of Receipt MM / DD / YYYY 01 / 14 / 2010
	Mailing Address 310 First Street SE PO Box 77416	Transaction ID: 00129.C177917
	City Washington State DC Zip Code 20003-	Amount of Each Receipt this Period 8580.00
	FEC ID number of contributing federal political committee. C C00003418	Transfers From Affil./Auth.
	Name of Employer Political Committee Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12436.00	

C.	Full Name (Last, First, Middle Initial) Republican National Committee	Date of Receipt MM / DD / YYYY 01 / 14 / 2010
	Mailing Address 310 First Street SE PO Box 77416	Transaction ID: 00129.C177920
	City Washington State DC Zip Code 20003-	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00003418	Transfers From Affil./Auth.
	Name of Employer Political Committee Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 13436.00	

SUBTOTAL of Receipts This Page (optional)	▶	13436.00
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 21 / 42
(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)
RNC Rep. Nat. Committee

Mailing Address 310 First Street, SE

City Washington State DC Zip Code 20003-

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

Name of Employer Information Requested Occupation
FEC ID: C00003418

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 01 / 13 / 2010
Transaction ID: 00218.C178080
Amount of Each Receipt this Period 25000.00
Transfers From Affil./Auth.

B. Full Name (Last, First, Middle Initial)
Scott Brown for US Senate Committee

Mailing Address PO BOX 395

City Wrentham State MA Zip Code 02093-

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

Name of Employer Candidate Committee Occupation
FEC ID # C00467233

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 119218.00

Date of Receipt 01 / 08 / 2010
Transaction ID: 00220.C178083
Amount of Each Receipt this Period 119218.00
Transfers From Affil./Auth.

C. Full Name (Last, First, Middle Initial)
Scott Brown for US Senate Committee

Mailing Address PO BOX 395

City Wrentham State MA Zip Code 02093-

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

Name of Employer Candidate Committee Occupation
FEC ID # C00467233

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 309170.00

Date of Receipt 01 / 11 / 2010
Transaction ID: 00218.C178079
Amount of Each Receipt this Period 189952.00
Transfers From Affil./Auth.

SUBTOTAL of Receipts This Page (optional) ► 334170.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 42
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) National Republic Senatorial Committee		Date of Receipt
	Mailing Address 425 2nd St. NE		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20002-
	FEC ID number of contributing federal political committee.		Transaction ID: 00220.C178081
Name of Employer FEC ID: C00027466		Occupation National Party Committee	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="151900.00"/>
		<input type="text" value="151900.00"/>	Transfers From Affil./Aut-h.

B.	Full Name (Last, First, Middle Initial) National Republic Senatorial Committee		Date of Receipt
	Mailing Address 425 2nd St. NE		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20002-
	FEC ID number of contributing federal political committee.		Transaction ID: 00220.C178082
Name of Employer FEC ID: C00027466		Occupation National Party Committee	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="348100.00"/>
		<input type="text" value="500000.00"/>	Transfers From Affil./Aut-h.

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="847606.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

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

<p>A. Full Name (Last, First, Middle Initial) Bowditch & Dewey</p> <p>Mailing Address 311 Main St. PO Box 15156</p> <p>City Worcester State MA Zip Code 01615-0156</p> <p>Purpose of Disbursement General counsel and compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00219.E11884 Date of Disbursement 01 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>GENERAL COUNSEL AND COMPLIANCE</p>
<p>B. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts</p> <p>Mailing Address Landmark Center 401 Park Drive</p> <p>City Boston State MA Zip Code 02215-</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E11813 Date of Disbursement 01 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 936.40</p> <p>HEALTH INSURANCE</p>
<p>C. Full Name (Last, First, Middle Initial) Byte Bulb</p> <p>Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.</p> <p>City Hanover State MA Zip Code 02339-</p> <p>Purpose of Disbursement party related website development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E11819 Date of Disbursement 01 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 3291.67</p> <p>PARTY RELATED WEBSITE DEVELOPMENT</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4578.07

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) Byte Bulb Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD. City Hanover State MA Zip Code 02339-	Transaction ID: 00217.E11820 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 3000.00 Category/Type PARTY RELATED WEBSITE DEVELOPMENT
Purpose of Disbursement party related website development 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) Kauppi Communications Mailing Address 27 Townly Road City Watertown State MA Zip Code 02472-	Transaction ID: 00219.E11844 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 3000.00 Category/Type COMMUNICATIONS CONSULTING FEE - PARTY RELATED NON FEA
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C. Full Name (Last, First, Middle Initial) Kauppi Communications Mailing Address 27 Townly Road City Watertown State MA Zip Code 02472-	Transaction ID: 00219.E11845 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 3000.00 Category/Type COMMUNICATIONS CONSULTING FEE PARTY RELATED NON FEA
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 42

<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: 00219.E11833 Date of Disbursement 01 / 07 / 2010
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 4880.10
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement party related telemkt 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 TELEMKT FUN-DRAISING

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 00219.E11835 Date of Disbursement 01 / 14 / 2010
	Mailing Address 7300 Hudson Blvd. Ste	Amount of Each Disbursement this Period 4269.95
	City Saint Paul State MN Zip Code 55128-	
	Purpose of Disbursement party related telemkt 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 TELEMKT FUN-DRAISING

C.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 00219.E11893 Date of Disbursement 01 / 14 / 2010
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 1617.02
	City Stoneham State MA Zip Code 02180-	
	Purpose of Disbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10767.07
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 00219.E11860 Date of Disbursement 01 / 21 / 2010
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 516.27
	City Stoneham State MA Zip Code 02180-	
	Purpose of Disbursement Reimbursement cell phone	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT CELL PHONE

B.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 00219.E11891 Date of Disbursement 01 / 27 / 2010
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 422.90
	City Stoneham State MA Zip Code 02180-	
	Purpose of Disbursement Reimbursement see below	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT SEE BELOW

C.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 00219.E11894 Date of Disbursement 01 / 27 / 2010
	Mailing Address 74 Green Street	Amount of Each Disbursement this Period 365.00
	City Stoneham State MA Zip Code 02180-	
	Purpose of Disbursement Reimbursement parking food travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT PARKING FOOD TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶

1304.17

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Bellwether Consultin	Transaction ID: 00219.E11883 Date of Disbursement 01 / 07 / 2010
	Mailing Address PO Box 1253	Amount of Each Disbursement this Period 550.00
	City Oakland State FL Zip Code 34760-	
	Purpose of Disbursement Political Consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		POLITICAL CONSULTING

B.	Full Name (Last, First, Middle Initial) Tara Esfahanian	Transaction ID: 00219.E11875 Date of Disbursement 01 / 27 / 2010
	Mailing Address 177 Upham St.	Amount of Each Disbursement this Period 2500.00
	City Melrose State MA Zip Code 02176-	
	Purpose of Disbursement Fundraising consulting 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) ▼
		FUNDRAISING CONSULTING FEE

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 00219.E11842 Date of Disbursement 01 / 07 / 2010
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 653.07
	City Boston State MA Zip Code 02131-	
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional) ► **3703.07**

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 00219.E11843 Date of Disbursement 01 / 21 / 2010
	Mailing Address 34 Fresno St.	
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 685.15
	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: 00219.E11841 Date of Disbursement 01 / 25 / 2010
	Mailing Address 34 Fresno St.	
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 128.72
	Purpose of Disbursement Reimbursement for stamps Candidate Name	REIMBURSEMENT FOR STAMPS
	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) Susan Keene	Transaction ID: 00219.E11846 Date of Disbursement 01 / 07 / 2010
	Mailing Address 76 Locksley Rd.	
	City Lynnfield State MA Zip Code 01940-	Amount of Each Disbursement this Period 964.50
	Purpose of Disbursement accounting services Candidate Name	ACCOUNTING SERVICES
	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) ▶

1778.37

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. 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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00219.E11849</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1028.00"/></p> <p>ACCOUNTING SERVICES</p>
<p>B. Full Name (Last, First, Middle Initial) Matthew Keswick</p> <p>Mailing Address 231 Victory Road</p> <p>City North Quincy State MA Zip Code 02171-</p> <p>Purpose of Disbursement consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00219.E11855</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="7"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p> <p>CONSULTING</p>
<p>C. Full Name (Last, First, Middle Initial) Melissa Lucas</p> <p>Mailing Address 22 Slayton Road</p> <p>City Melrose State MA Zip Code 02176-</p> <p>Purpose of Disbursement Fundraising consulting fea for party related non fea</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00219.E11857</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>FUNDRAISING CONSULTING FEA FOR PARTY RELATED NON FEA</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6528.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></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)

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

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

A.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems Mailing Address P.O. Box 7247-0322 City Philadelphia State PA Zip Code 19170-0322 Purpose of Disbursement Copier Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00219.E11851 Date of Disbursement 01 / 27 / 2010 Amount of Each Disbursement this Period 890.08 COPIER LEASE
B.	Full Name (Last, First, Middle Initial) Jennifer Nassour Mailing Address 49 Chelsea St., Unit C1-307 City Boston State MA Zip Code 02129- Purpose of Disbursement Reimbursement for travelfood parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00219.E11889 Date of Disbursement 01 / 07 / 2010 Amount of Each Disbursement this Period 442.18 REIMBURSEMENT FOR TRAVEL- FOOD PARKING
C.	Full Name (Last, First, Middle Initial) Johnnies on the Side Mailing Address 138 Portland St. City Boston State MA Zip Code 02114- Purpose of Disbursement Staff/volunteer dinner 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: 00219.E11840 Date of Disbursement 01 / 07 / 2010 Amount of Each Disbursement this Period 366.25 STAFF/VOLUNTEER DINNER

SUBTOTAL of Disbursements This Page (optional) ▶

1698.51

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ox-Eye Properties Mailing Address c/o Massey & Co. 85 Merrimac Street City Boston State MA Zip Code 02114- Purpose of Disbursement Rent & 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: 00219.E11862 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 4713.70 Category/Type RENT & UTILITIES

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 & 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: 00219.E11863 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 4713.11 Category/Type RENT & UTILITIES

C. Full Name (Last, First, Middle Initial) Paychex/InterPay Mailing Address PO Box 8295 City Boston State MA Zip Code 02266- Purpose of Disbursement payroll fee 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: 00219.E11864 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 74.16 Category/Type PAYROLL FEE

SUBTOTAL of Disbursements This Page (optional) ▶	9500.97
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 00219.E11866 Date of Disbursement 01 / 07 / 2010
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1974.44
	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

B.	Full Name (Last, First, Middle Initial) Paychex/InterPay	Transaction ID: 00219.E11867 Date of Disbursement 01 / 21 / 2010
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 1785.13
	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: 00219.E11865 Date of Disbursement 01 / 21 / 2010
	Mailing Address PO Box 8295	Amount of Each Disbursement this Period 170.90
	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) ► 3930.47

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Mak Productions Mailing Address 123 Hill Street City Fall River State MA Zip Code 02723- Purpose of Disbursement party related shirts and pins for volunteers 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: 00219.E11853 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 537.50 PARTY RELATED SHIRTS AND PINS FOR VOLUNTEERS

B. Full Name (Last, First, Middle Initial) Sprint/Nextel Mailing Address PO Box 17990 City Denver State CO Zip Code 80217- Purpose of Disbursement 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) ▼	Transaction ID: 00219.E11872 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 85.34 CELL PHONE

C. Full Name (Last, First, Middle Initial) Sprint/Nextel Mailing Address PO Box 17990 City Denver State CO Zip Code 80217- Purpose of Disbursement 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) ▼	Transaction ID: 00219.E11873 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 124.29 CELL PHONE

SUBTOTAL of Disbursements This Page (optional) ▶	747.13
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Public Opinion Strategies Mailing Address 277 South Washington Street, Suite City Alexandria State VA Zip Code 22314- Purpose of Disbursement party related polling 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: 00219.E11896 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 304.40 Category/Type PARTY RELATED POLLING

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: 00217.E11826 Date of Disbursement 01 / 14 / 2010
	Amount of Each Disbursement this Period 5346.82 Category/Type DIRECT MAIL-PARTY RELATED NON FEA

C. 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: 00217.E11827 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 2219.60 Category/Type DIRECT MAIL-PARTY RELATED NON FEA

SUBTOTAL of Disbursements This Page (optional) ▶	7870.82
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1 City Worcester State MA Zip Code 01654- Purpose of Disbursement 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) ▼	Transaction ID: 00219.E11879 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 533.47 OFFICE PHONE SERVICE
B. Full Name (Last, First, Middle Initial) Verizon Verizon Wireless Mailing Address PO Box 5029 City Wallingford State CT Zip Code 06492- Purpose of Disbursement 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) ▼	Transaction ID: 00219.E11881 Date of Disbursement 01 / 27 / 2010
	Amount of Each Disbursement this Period 227.22 CELL PHONE

SUBTOTAL of Disbursements This Page (optional)	760.69
TOTAL This Period (last page this line number only)	62167.34

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Nick Connors	Transaction ID: 00219.E11859 Date of Disbursement 01 / 07 / 2010
	Mailing Address 74 Green Street	
	City Stoneham State MA Zip Code 02180-	Amount of Each Disbursement this Period 1941.42
	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) Tarah Donoghue	Transaction ID: 00219.E11877 Date of Disbursement 01 / 07 / 2010
	Mailing Address 3 Main Street	
	City Dover State MA Zip Code 02030-	Amount of Each Disbursement this Period 1584.42
	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) Tarah Donoghue	Transaction ID: 00219.E11878 Date of Disbursement 01 / 21 / 2010
	Mailing Address 3 Main Street	
	City Dover State MA Zip Code 02030-	Amount of Each Disbursement this Period 1584.41
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	5110.25
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 22 Presidents Lane

City Quincy State MA Zip Code 02169-

Purpose of Disbursement payroll

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00219.E11852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 / 42
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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"/>	Transaction ID: LS90513.E11275	
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. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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"/>	Transaction ID: LS90513.E11276	
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"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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"/>	Transaction ID: LS90513.E11277	
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"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1750.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)	PAGE 39 / 42
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Original Debt for telemarketing non-fea party related
Mailing Address 7300 Hudson Blvd. Ste	
City State ZIP Code Saint Paul MN 55128-	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">3910.20</div>	Transaction ID: LS91217.E11763
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">3910.20</div>	

1) SUBTOTALS This Period This Page (optional).....	▶	<div style="border: 1px solid black; padding: 2px;">3910.20</div>
2) TOTALS This Period (last page this line number only).....	▶	<div style="border: 1px solid black; padding: 2px;">5660.20</div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<div style="border: 1px solid black; padding: 2px;">0.00</div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<div style="border: 1px solid black; padding: 2px;">5660.20</div>

