

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

ADDRESS (number and street)

1800 POST ROAD

SUITE 17-I

Check if different
than previously
reported. (ACC)

WARWICK

RI

02886

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00078196

3. IS THIS
REPORTNEW
(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
Year-End 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 (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Jamison, Linda, , ,

Signature of Treasurer

Jamison, Linda, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEEReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
01		01		2025

 To:

M M	/	D D	/	Y Y Y Y Y
03		31		2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2025		62430.56
(b) Cash on Hand at Beginning of Reporting Period.....	62430.56	
(c) Total Receipts (from Line 19)	255173.40	255173.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	317603.96	317603.96
7. Total Disbursements (from Line 31)	285034.28	285034.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	32569.68	32569.68
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 01 2025

To:

M M / D D / Y Y Y Y
03 31 2025**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).....

3200.00

3200.00

(ii) Unitemized

685.81

685.81

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3885.81

3885.81

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

3885.81

3885.81

12. Transfers From Affiliated/Other

Party Committees.....

251287.59

251287.59

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 Transfers (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))

255173.40

255173.40

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

255173.40

255173.40

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	106.99	106.99
(b) Other Federal Operating Expenditures	22969.96	22969.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23076.95	23076.95
22. Transfers to Affiliated/Other Party Committees.....	251287.59	251287.59
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	10669.74	10669.74
(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)).....	10669.74	10669.74
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	285034.28	285034.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	284927.29	284927.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3885.81	3885.81
34. Total Contribution Refunds (from Line 28(d))	10669.74	10669.74
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	- 6783.93	- 6783.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	22969.96	22969.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22969.96	22969.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 32
(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)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sanborn, Mary Louise, , ,

Mailing Address 21 Bay View Drive

City
JamestownState
RIZip Code
02835FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2025

Transaction ID : SA11AI.9376

Amount of Each Receipt this Period

3200.00

☐ Memo ItemIn-kind - Event Factory - room rental and food for
annual convention

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3200.00

3200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 32

(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 First Street, SE

City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

C00003418

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

251287.59

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2025

Transaction ID : SA12.9380

Amount of Each Receipt this Period

251287.59

☐ Memo ItemFED WIRE FROM TRUMPT 47 TO RETURN 2024
DONATIONS OVER THE LIMIT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOEFFLER, KELLY, L, ,

Mailing Address 3650 TUXEDO RD NW

City
ATLANTAState
GAZip Code
30305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYEDOccupation (for Individual)
UNEMPLOYED

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

- 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 28 / 2024

Transaction ID : SA12.9380.0

Amount of Each Receipt this Period

- 10000.00

☒ Memo ItemTRUMP 47 Took back funds and reappropriated
amount to Jesse Powell

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POWELL, JESSE, , ,

Mailing Address 548 MARKET STREET

City
SAN FRANCISCOState
CAZip Code
94104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 28 / 2024

Transaction ID : SA12.9380.1

Amount of Each Receipt this Period

10000.00

☒ Memo Item

Donation replacing Kelly Loeffler by Trump 47 Fund

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

251287.59

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 32

(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHILDS, JOHN, W.,

Mailing Address 116 HUNTINGTON AVE STE 701

City
BOSTONState
MAZip Code
02116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JW CHILDS ASSOCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

- 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA12.9380.2

Amount of Each Receipt this Period

- 10000.00

☒ Memo ItemTrump 47 took back donation and reallocated funds to
Timothy Barnard

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barnard, Timothy, ,

Mailing Address 701 Gold Ave

City
BozemanState
MTZip Code
59715FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Barnard ConstructionOccupation (for Individual)
Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2024

Transaction ID : SA12.9380.3

Amount of Each Receipt this Period

10000.00

☒ Memo ItemTrump 47 reappropriated donation from Joseph Childs
to Barnard

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Popolo, Joseph, Victor, , Jr.

Mailing Address 9002 Douglas Ave

City
DallasState
TXZip Code
75225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Charles and Potomoc CapitalOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

- 3073.94

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2024

Transaction ID : SA12.9380.4

Amount of Each Receipt this Period

- 3073.94

☒ Memo ItemTrump 47 took back donation and reappropriated to
Nancy Sanchez

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Centner, Leila, , ,

Mailing Address 3921 Alton Road #465

City
Miami BeachState
FLZip Code
33140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retiredOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

- 10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2024

Transaction ID : SA12.9380.5

Amount of Each Receipt this Period

- 10000.00

☒ Memo ItemTrump 47 took back donation and reappropriated to
Mara Leticia

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LETICA, MARA, SAAD, ,

Mailing Address 3595 GORDON DRIVE

City
NAPLESState
FLZip Code
34102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OAKLAND COUNTYOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2024

Transaction ID : SA12.9380.6

Amount of Each Receipt this Period

10000.00

☒ Memo ItemTRUMP 47 DONATION REPLACING LEILA
CENTENER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Centner, David, , ,Mailing Address 3921 Alton Road
#465City
Miami BeachState
FLZip Code
33140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retiredOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

- 1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2024

Transaction ID : SA12.9380.7

Amount of Each Receipt this Period

- 1600.00

☒ Memo Item

TRUMPT 47 - TAKING BACK DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANCHEZ, NANCY, HILES, ,Mailing Address 2505 N STATE HIGHWAY 360
SUITE 800City
GRAND PRAIRIEState
TXZip Code
75050FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2024

Transaction ID : SA12.9380.8

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMPT 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FAMILY SECURITIES LLC

Mailing Address 170 PROSPECT AVE STE 4

City
HACKENSACKState
NJZip Code
07601FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2024

Transaction ID : SA12.9380.9

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALMERI, ANTHONY, , ,

Mailing Address 170 PROSPECT AVE STE 4

City
HACKENSACKState
NJZip Code
07601FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2024

Transaction ID : SA12.9380.10

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRUMP 47 DONATION

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALMERI, LINDA, , ,

Mailing Address 170 PROSPECT AVE STE 4

City
HACKENSACKState
NJZip Code
07601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARO REALTY LLCOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA12.9380.11

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRUMPT 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOLEY, WILLIAM, , ,

Mailing Address 225 EDMOR ROAD

City
WEST PALM BEACHState
FLZip Code
33405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA12.9380.12

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOLEY, JUDITH, , ,

Mailing Address 225 EDMOR ROAD

City
WEST PALM BEACHState
FLZip Code
33405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA12.9380.13

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 32

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADDISON, JOHN, C, ,

Mailing Address 417 W FRIAR TUCK LN

City
HOUSTONState
TXZip Code
77024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIMAMERICA DISTRIBUTIONOccupation (for Individual)
NON-EXECUTIVE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2024

Transaction ID : SA12.9380.14

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZISK, JEFFREY, B, ,

Mailing Address 5347 SURREY CIR

City
DALLASState
TXZip Code
75209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CART.COMOccupation (for Individual)
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2024

Transaction ID : SA12.9380.15

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMO 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZISK, LOYD, , ,

Mailing Address 5347 SURREY CIR

City
DALLASState
TXZip Code
75209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2024

Transaction ID : SA12.9380.16

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRANKEL, KEITH, , ,

Mailing Address 1900 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2024

Transaction ID : SA12.9380.17

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILTON, CHELSEY, VIRGINIA, ,

Mailing Address 13808 CANYON DR

City
PHOENIXState
AZZip Code
85048FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2024

Transaction ID : SA12.9380.18

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAKOLTA, JOHN, , , JR

Mailing Address 777 WOODWARD AVE

City
DETROITState
MIZip Code
48226FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
WACBRIDGE GROUPOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2024

Transaction ID : SA12.9380.19

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ISHBA, JEFFREY, A, ,Mailing Address 251 E MERRILL STREET
SUITE 212City
BIRMINGHAMState
MSZip Code
48009FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
ISHBIA & GAGLEARDOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2024**Transaction ID : SA12.9380.20**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ISHBIA, JOANNE, I, ,Mailing Address 251 MERRILL ST
SUITE 212City
BURMINGHAMState
MSZip Code
48009FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2024**Transaction ID : SA12.9380.21**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLUM, SCOTT, , ,

Mailing Address 2925 RED HOUSE RD

City
JACKSONState
WYZip Code
83001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2024**Transaction ID : SA12.9380.22**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUART, CARLOS, A, ,

Mailing Address 3915 W MILLERS BRIDGE RD

City
TALAHASSEEState
FLZip Code
32312FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
CDR ENTERPRISES INCOccupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2024

Transaction ID : SA12.9380.23

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERS, LENIN, A, ,

Mailing Address 507 N LINDSAY ST

City
HIGH POINTState
NCZip Code
27262FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2024

Transaction ID : SA12.9380.24

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUSK, ELON, , ,Mailing Address 2110 RANCH RD 620 S
UNIT 341886City
LAKEWAYState
TXZip Code
78734FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SPACE EXPLORATION TECHNOLOGIESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2024

Transaction ID : SA12.9380.25

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DETERMAN, MARK, , ,

Mailing Address 8813 SUMMER GROVE DR

City
MONTPELIERState
MDZip Code
20706FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
US DEPT OF JUSTICEOccupation (for Individual)
FEDERAL PROSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2024

Transaction ID : SA12.9380.26

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WERTHEIM, HERBERT, A, ,

Mailing Address 4470 SW 74TH AVE

City
MIAMIState
FLZip Code
33155FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2024

Transaction ID : SA12.9380.27

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEGREA, DAN, , ,

Mailing Address 3 NORTH STREET

City
GREENWICHState
CTZip Code
06830FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2024

Transaction ID : SA12.9380.28

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MSA ELM FUND LP

Mailing Address 1218 CERRO GORDO ROAD

City
SANTA FEState
NMZip Code
87501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2024

Transaction ID : SA12.9380.29

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARBURG, BENJAMIN, DAVID, ,

Mailing Address 1218 CERRO GORDO RD

City
SANTA FEState
NMZip Code
87501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

MSA

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2024

Transaction ID : SA12.9380.30

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FROST, PHILLIP, , ,Mailing Address 4400 BISCAYNE BLVD
SUITE 660City
MIAMIState
FLZip Code
33137FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

OPKO HEALTH INC

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2024

Transaction ID : SA12.9380.31

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUMPEL, BARBARA, , ,

Mailing Address 1279 HOUSTON ST

City
MELBOURNEState
FLZip Code
32935FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
DELORENZO GROUPOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2024

Transaction ID : SA12.9380.32

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDKIN, THOMAS, , ,

Mailing Address 1375 ENCLAVE PKWY

City
HOUSTONState
TXZip Code
77077FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
FRIEDKIN HOLDINGSOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2024

Transaction ID : SA12.9380.33

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASSOCIATED BUILDERS AND CONTRACTORS, INC. POLITICAL ACTION COMMITTEE (ABC PAC)Mailing Address 440 FIRST STREET NW
SUITE 200City
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C** C00010421

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2024

Transaction ID : SA12.9380.34

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRUMP 47 DONATION

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 32
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Duggan, Robert, William, ,

Mailing Address 611 S Fort Harrison Ave 306

City
ClearwaterState
FLZip Code
33756FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EntrepreneurOccupation (for Individual)
Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2024

Transaction ID : SA12.9380.35

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Herbster, Charles, , ,

Mailing Address PO Box 549

City
Falls CityState
NEZip Code
68355FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2024

Transaction ID : SA12.9380.36

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANWAR, VICKY, , ,Mailing Address 110 N MARIENFIELD ST
ST 101City
MIDLANDState
TXZip Code
79701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA12.9380.37

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 32

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRECKA, DAVID, , ,

Mailing Address 7556 OLENTANGY RIVER RD

City
DELAWAREState
OHZip Code
43015FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NEXT GENERATION FILMSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 03 / 2024

Transaction ID : SA12.9380.38

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRUMP 47 DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

251287.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Airport Plaza Associates

Mailing Address 1800 Post Road

City
WarwickState
RIZip Code
02886

Purpose of Disbursement

utilities -gas & electric

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7							2025

FEC Identification Number

C

Transaction ID : SB21B.9326

Amount of Each Disbursement this Period

851.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Airport Plaza Associates

Mailing Address 1800 Post Road

City
WarwickState
RIZip Code
02886

Purpose of Disbursement

utilities

Candidate Name

001
Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3							2025

FEC Identification Number

C

Transaction ID : SB21B.9359

Amount of Each Disbursement this Period

280.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Airport Plaza Associates

Mailing Address 1800 Post Road

City
WarwickState
RIZip Code
02886

Purpose of Disbursement

utilities

Candidate Name

001
Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3							2025

FEC Identification Number

C

Transaction ID : SB21B.9360

Amount of Each Disbursement this Period

349.23

☐ Memo Item

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

1482.09

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 1 Skyview Drive

City
Forth WorthState
TXZip Code
76155

Purpose of Disbursement

travel - airfare

Candidate Name

002

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9367

Amount of Each Disbursement this Period

266.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAREY, AIDAN, , ,

Mailing Address 3 Morning Star Court

City
LincolnState
RIZip Code
02865

Purpose of Disbursement

contracting for bylaws, credentials and education

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9362

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COX COMMUNICATIONS

Mailing Address 621 WILLIAM ST.

City
EAST ORANGEState
NJZip Code
07017

Purpose of Disbursement

cable, phones and internet

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9296

Amount of Each Disbursement this Period

1163.49

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4429.86

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. COX COMMUNICATIONS

Mailing Address 621 WILLIAM ST.

City
EAST ORANGEState
NJZip Code
07017Purpose of Disbursement
cable, phones and internet

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9327

Amount of Each Disbursement this Period

1176.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 520 So Grand Ave

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
monthly subscription - old website

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9334

Amount of Each Disbursement this Period

171.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nationbuilder

Mailing Address 520 So Grand Ave

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
monthly subscription - old website

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9369

Amount of Each Disbursement this Period

171.00

☐ Memo Item

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

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

1518.25

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Numinar

Mailing Address 1202 Wilson Blvd

City
ArlingtonState
VAZip Code
22209

Purpose of Disbursement

monthly subscription

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9299

Amount of Each Disbursement this Period

2350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Numinar

Mailing Address 1202 Wilson Blvd

City
ArlingtonState
VAZip Code
22209

Purpose of Disbursement

mnthly subscription

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9328

Amount of Each Disbursement this Period

2350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Numinar

Mailing Address 1202 Wilson Blvd

City
ArlingtonState
VAZip Code
22209

Purpose of Disbursement

monthly subscription

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.9363

Amount of Each Disbursement this Period

2350.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7050.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. OMNI SHOREHAM

Mailing Address 2500 CALVERT ST

City
WASHINGTONState
DCZip Code
20008Purpose of Disbursement
travel - hotel

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9300

Amount of Each Disbursement this Period

288.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OMNI SHOREHAM

Mailing Address 2500 CALVERT ST

City
WASHINGTONState
DCZip Code
20008Purpose of Disbursement
travel - hotel

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9301

Amount of Each Disbursement this Period

288.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OMNI SHOREHAM

Mailing Address 2500 CALVERT ST

City
WASHINGTONState
DCZip Code
20008Purpose of Disbursement
travel - hotel

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.9307

Amount of Each Disbursement this Period

288.72

☐ Memo Item

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

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

866.16

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. OMNI SHOREHAM

Mailing Address 2500 CALVERT ST

City
WASHINGTONState
DCZip Code
20008

Purpose of Disbursement

travel - hotel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	2	5		

FEC Identification Number

C**Transaction ID : SB21B.9313**

Amount of Each Disbursement this Period

1065.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sanborn, Mary Louise, , ,

Mailing Address 21 Bay View Drive

City
JamestownState
RIZip Code
02835

Purpose of Disbursement

In-kind - Event Factory - room rental and food for annual convention

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	2	5		

FEC Identification Number

C**Transaction ID : SB21B.9377**

Amount of Each Disbursement this Period

3200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNTMailing Address 95 WHITE BRIDGE RD
SUITE 414City
NASHVILLEState
TNZip Code
37205

Purpose of Disbursement

Inauguration donation for Trump

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	2	5		

FEC Identification Number

C C00040220**Transaction ID : SB21B.9304**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6765.82

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Uber Car ServiceMailing Address 1515 Third St
qCity
San FranciscoState
CAZip Code
94016Purpose of Disbursement
travel-uber

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.9314

Amount of Each Disbursement this Period

60.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

60.21

22172.39

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 First Street, SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

RETURN FUNDS TO TRUMP 47 SAME LIST AS RECEIVING SIDE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2025

FEC Identification Number

C C00003418**Transaction ID : SB22.9455**

Amount of Each Disbursement this Period

251287.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

251287.59

251287.59

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SB22**

Transaction ID : **SB22.9455**

THE EXACT LIST OF DONORS THAT WERE LISTED ON TRUMPT 47 RECEIVING DEPOSIT OF 251,287.59 ON 3/5/2025. THIS WAS TO CORRECT THE DONORS OF JOHN W. CHILDS, KELLY LOEFFLER, JOSEPH POPOLO THAT WERE OVER THE ALLOWABLE DONATION AMOUNT IN 2024.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Linder, Carl, H, ,

Mailing Address 301 E 40th St. Fl 40

City
CincinnatiState
OHZip Code
45202

Purpose of Disbursement

RETURN OF DONATION TO THE NRSC VISOTRY FUND

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	5			

FEC Identification Number

C

Transaction ID : SB28A.9560

Amount of Each Disbursement this Period

669.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

669.74

669.74

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☒ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. NRSC VictoryMailing Address 228 S. Washinton St6
Suite 115City
AlexandriaState
VAZip Code
22102

Purpose of Disbursement

RETURN OF TWO DONATIONS - COLLERAN AND LINDER

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2025

FEC Identification Number

C C00837518**Transaction ID : SB28B.9544**

Amount of Each Disbursement this Period

0.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLLERAN

Mailing Address

City

State

Zip Code

Purpose of Disbursement

RETURN OF DONATION TO NRSC VISTORY FUND COLLERAN

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2024

FEC Identification Number

C**Transaction ID : SB28B.9544.c**

Amount of Each Disbursement this Period

0.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

0.00

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**PAGE 32 OF 32
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.9329 ☐ Memo Item			Allocated Activity or Event:	
Microsoft 365			☒ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1 mMicrosoft Way			☐ Voter Drive ☐ Direct Candidate Support	
City	State	Zip Code	☐ Public Comm (ref to party only) by PAC	
Redmond	WA	98052		
Purpose of Disbursement: monthly software subscription			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			106.99	
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y		
		02 / 03 / 2025		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
0.00			106.99	106.99

B. Full Name (Last, First, Middle Initial) ☐ Memo Item			Allocated Activity or Event:	
			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address			☐ Voter Drive ☐ Direct Candidate Support	
City	State	Zip Code	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement:			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) ☐ Memo Item			Allocated Activity or Event:	
			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address			☐ Voter Drive ☐ Direct Candidate Support	
City	State	Zip Code	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement:			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		106.99		106.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
0.00		106.99		106.99