

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 Rhode Island Democratic State Committee

ADDRESS (number and street) P.O. Box 6004 Providence RI 02940 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00136200 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 01 01 2007 through 01 31 2007

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 John McConnell, Jr.

Signature of Treasurer Electronically Filed by John McConnell, Jr. Date 08 17 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">54799.15</td></tr></table>	54799.15
Y	Y	Y	Y									
2	0	0	7									
54799.15												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">54799.15</td></tr></table>	54799.15										
54799.15												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">7919.26</td></tr></table>	7919.26	<table border="1" style="width: 100%;"><tr><td align="right">7919.26</td></tr></table>	7919.26								
7919.26												
7919.26												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">62718.41</td></tr></table>	62718.41	<table border="1" style="width: 100%;"><tr><td align="right">62718.41</td></tr></table>	62718.41								
62718.41												
62718.41												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">32579.66</td></tr></table>	32579.66	<table border="1" style="width: 100%;"><tr><td align="right">32579.66</td></tr></table>	32579.66								
32579.66												
32579.66												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">30138.75</td></tr></table>	30138.75	<table border="1" style="width: 100%;"><tr><td align="right">30138.75</td></tr></table>	30138.75								
30138.75												
30138.75												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">5755.07</td></tr></table>	5755.07										
5755.07												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	1800.00	1800.00
(i) Itemized (use Schedule A)	350.00	350.00
(ii) Unitemized	2150.00	2150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2150.00	2150.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	969.92	969.92
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)	3335.47	3335.47
(b) Levin Funds (from Schedule H5)	1463.87	1463.87
(c) Total Transfer (add 18(a) and 18(b)).	4799.34	4799.34
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7919.26	7919.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3119.92	3119.92

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5838.23	5838.23
(ii) Non-Federal Share.....	9744.09	9744.09
(b) Other Federal Operating Expenditures.....	1519.96	1519.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	17102.28	17102.28
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).....	1262.44	1262.44
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	14214.94	14214.94
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	14214.94	14214.94
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	32579.66	32579.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	22835.57	22835.57

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2150.00	2150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2150.00	2150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7358.19	7358.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	969.92	969.92
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6388.27	6388.27

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 38
	(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)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Shawn Donahue

Mailing Address 14 Rome Avenue

City State Zip Code
North Providence RI 02904

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

Name of Employer State of Rhode Island Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	8	/	2	0	0	7

Transaction ID: SA11A1.14169

Amount of Each Receipt this Period
300.00

Computer purchase

B. Full Name (Last, First, Middle Initial)
Daniel Doyle

Mailing Address PO Box 1677

City State Zip Code
Kingstown RI 02881

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

Name of Employer Inst for International Sport Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: SA11A1.14160

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)	▶	1800.00
TOTAL This Period (last page this line number only)	▶	1800.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 38
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melodie DeMulling		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 1 / 2 0 0 7	
Mailing Address 13981 121st Avenue		Transaction ID: SA15.14164	
City State Zip Code Dayton MN 55327	Amount of Each Receipt this Period 223.23		
FEC ID number of contributing federal political committee. C	Cobra payment		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 223.23		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Michael Dorsey		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 1 / 2 0 0 7	
Mailing Address 166 Valley Street		Transaction ID: SA15.14163	
City State Zip Code Providence RI 02909	Amount of Each Receipt this Period 223.23		
FEC ID number of contributing federal political committee. C	Cobra payment		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 223.23		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. James Fiorentini		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 2 / 2 0 0 7	
Mailing Address 36 Macon Avenue		Transaction ID: SA15.14165	
City State Zip Code Haverhill MA 01830	Amount of Each Receipt this Period 223.23		
FEC ID number of contributing federal political committee. C	Cobra payment		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 223.23		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	669.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 38	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Prospero Suazo

Mailing Address 230 Roger Williams

City State Zip Code
Providence RI 02907

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
223.23

Date of Receipt

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

Transaction ID: SA15.14166

Amount of Each Receipt this Period
223.23

Cobra payment

SUBTOTAL of Receipts This Page (optional)	▶	223.23
TOTAL This Period (last page this line number only)	▶	892.92

**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 9 / 38

<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)
Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Blue Cross Blue Shield of Rhode Island

Mailing Address PO Box 1057

City Providence State RI Zip Code 02901

Purpose of Disbursement
Cobra payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.14127

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1519.77

SUBTOTAL of Disbursements This Page (optional)

1519.77

TOTAL This Period (last page this line number only)

1519.77

**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)
Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: SB30B.14121 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7
Mailing Address One Citizens Plaza		Amount of Each Disbursement this Period 3763.42
City Providence State RI Zip Code 02903	Purpose of Disbursement Payroll tax deposit 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Department of Employment & Training		Transaction ID: SB30B.14174 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address One Capitol Hill		Amount of Each Disbursement this Period 9562.16
City Providence State RI Zip Code 02908	Purpose of Disbursement State unemployment taxes 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Division of Taxation		Transaction ID: SB30B.14122 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7
Mailing Address One Capitol Hill		Amount of Each Disbursement this Period 556.06
City Providence State RI Zip Code 02908	Purpose of Disbursement Payroll tax deposit 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	13881.64
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 38

<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)
Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. United States Treasury

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.14129

Date of Disbursement

/ /

Amount of Each Disbursement this Period

287.76

SUBTOTAL of Disbursements This Page (optional)

287.76

TOTAL This Period (last page this line number only)

14169.40

SCHEDULE C (FEC Form 3X)

LOANS

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

Transaction ID: SC/9.5183

LOAN SOURCE Full Name (Last, First, Middle Initial)

Licht 88 Committee

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address 350 Cole Avenue

City Providence State RI ZIP Code 02906

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5249.87	0.00	5249.87

TERMS

Date Incurred: M M 1 2, D D 3 1, Y Y Y Y 1 9 8 8
Date Due: _____ Interest Rate: _____ % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional)	5249.87
TOTALS This Period (last page in this line only)	5249.87

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 / 38	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHELDON II WHITEHOUSE	Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address 32 ELMGROVE AVENUE	
City State ZIP Code PROVIDENCE RI 02906	

Outstanding Balance Beginning This Period	Transaction ID: SD9.14176	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
505.20	0.00	505.20

1) SUBTOTALS This Period This Page (optional).....	505.20
2) TOTALS This Period (last page this line number only).....	505.20
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

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 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee: Democratic Senatorial Campaign Committee	Full Name of Subordinate Committee Rhode Island Democratic State Committee		
	Mailing Address P.O. Box 6004		
City Providence		State RI	ZIP Code 02940

Full Name (Last, First, Middle Initial) of Each Payee Department of Employment & Training		Purpose of Expenditure Unemployment tax- es-voter id	Category/Type
Mailing Address One Capitol Hill		Date M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
City Providence			
State RI		ZIP Code 02908	
Name of Federal Candidate Supported SHELDON II WHITEHOUSE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: RI District: 00	
Aggregate General Election Expenditure for this Candidate ▶		Amount 1262.44	
Transaction ID: SF25.14175		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

SUBTOTAL of Expenditures This Page (optional)	1262.44
TOTAL This Period (last page this line number only)	1262.44

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- X Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

Hope Awards 2006 (10/16/2006)

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

90.00 %

NONFEDERAL %

10.00 %Transaction ID:
H2.14471

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Rhode Island Democratic State Committee

NAME OF ACCOUNT RI Democratic Non-federal Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 3293.13
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		3293.13
i) Total Administrative		Transaction ID: H3.14108
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Rhode Island Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7	42.34

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		0.00	Transaction ID: H3.14109
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) Hope Awards 2006 (10/16/2006)	42.34		Transaction ID: H3.14109.0
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		42.34	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	3293.13
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	42.34
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	3335.47

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Advantage Payroll			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 90 Jefferson Boulevard			Allocated Activity or Event Year-To-Date 50.75		
City Warwick	State RI	Zip Code 02888	Date MM / DD / YYYY 01 / 02 / 2007		
Purpose of Disbursement: Processing Fees			Transaction ID: H4.14110		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.27		32.48		50.75

B. Full Name (Last, First, Middle Initial) Susann Della Rosa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 60 Don Avenue			Allocated Activity or Event Year-To-Date 6750.75		
City Rumford	State RI	Zip Code 02916	Date MM / DD / YYYY 01 / 10 / 2007		
Purpose of Disbursement: Accounting services-non employee			Transaction ID: H4.14112		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2412.00		4288.00		6700.00

C. Full Name (Last, First, Middle Initial) Pui O			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 249 Roosevelt Avenue			Allocated Activity or Event Year-To-Date 7550.75		
City Pawtucket	State RI	Zip Code 02860	Date MM / DD / YYYY 01 / 10 / 2007		
Purpose of Disbursement: January rent			Transaction ID: H4.14115		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.00		512.00		800.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2718.27		4832.48		7550.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Best Printing Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 17 Industrial Drive			Allocated Activity or Event Year-To-Date 7729.60																						
City	State	Zip Code	Category/ Type																						
Smithfield	RI	02917																							
Purpose of Disbursement: Stationery			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14116																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.39		114.46		178.85

B. Full Name (Last, First, Middle Initial) Cox Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 7941.60																						
City	State	Zip Code	Category/ Type																						
Newark	NJ	07101																							
Purpose of Disbursement: Monthly modem and cable			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14117																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.32		135.68		212.00

C. Full Name (Last, First, Middle Initial) William Lynch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 321 South Main Street			Allocated Activity or Event Year-To-Date 8033.60																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02903																							
Purpose of Disbursement: Reimburse travel expenses			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14131																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.12		58.88		92.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.83		309.02		482.85

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) T F Green Airport Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Airport Road			Allocated Activity or Event Year-To-Date 0.00		
City Warwick	State RI	Zip Code 02886	Date <input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Parking fee			Transaction ID: H4.14140		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.72		33.28		52.00

B. Full Name (Last, First, Middle Initial) Washington Taxi Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Not available			Allocated Activity or Event Year-To-Date 0.00		
City Washington	State DC	Zip Code 20002	Date <input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxi service			Transaction ID: H4.14143		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		12.80		20.00

C. Full Name (Last, First, Middle Initial) Washington Taxi Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Not available			Allocated Activity or Event Year-To-Date 0.00		
City Washington	State DC	Zip Code 20002	Date <input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxi service			Transaction ID: H4.14144		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		12.80		20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 300 South Riverside Plaza			Allocated Activity or Event Year-To-Date 8480.15	
City Chicago	State IL	Zip Code 60606	Date M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7	
Purpose of Disbursement: Credit card payment			Category/ Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.14132	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.75		285.80		446.55

B. Full Name (Last, First, Middle Initial) McCormick & Schmick			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11 Dorrance Street			Allocated Activity or Event Year-To-Date 0.00	
City Providence	State RI	Zip Code 02903	Date M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7	
Purpose of Disbursement: Meeting 11/20/06			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.14145	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.97		14.17		22.14

C. Full Name (Last, First, Middle Initial) Old Canteen, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 120 Atwells Avenue			Allocated Activity or Event Year-To-Date 0.00	
City Providence	State RI	Zip Code 02903	Date M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7	
Purpose of Disbursement: Meeting 12/1/06			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.14146	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.00		28.45		44.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.75		285.80		446.55

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Camille's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 71 Bradford Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Providence	RI	02903	Transaction ID: H4.14147																						
Purpose of Disbursement: Meeting 12/4/06			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.11		23.32		36.43

B. Full Name (Last, First, Middle Initial) Camille's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 71 Bradford Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Providence	RI	02903	Transaction ID: H4.14148																						
Purpose of Disbursement: Meeting 12/7/06			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.93		119.00		185.93

C. Full Name (Last, First, Middle Initial) Pane Vino			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 365 Atwells Avenue			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	0	/	2	0	0	7																
Providence	RI	02903	Transaction ID: H4.14149																						
Purpose of Disbursement: Meeting 12/15/06			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.74		100.86		157.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Raw Data Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 8976			Allocated Activity or Event Year-To-Date 8505.10																						
City	State	Zip Code	Category/ Type																						
Warwick	RI	02888																							
Purpose of Disbursement: Web site fees			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>7</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	2	/	2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	2	2	/	2	0	7	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14113																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.98		15.97		24.95

B. Full Name (Last, First, Middle Initial) City of Providence			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 25 Dorrance Street			Allocated Activity or Event Year-To-Date 8888.44																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02903																							
Purpose of Disbursement: Election night security			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>7</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	5	/	2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	2	5	/	2	0	7	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14118																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.00		245.34		383.34

C. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. 1			Allocated Activity or Event Year-To-Date 9092.31																						
City	State	Zip Code	Category/ Type																						
Worcester	MA	01654																							
Purpose of Disbursement: Telephone service			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>7</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	5	/	2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	2	5	/	2	0	7	7																
Activity or Event Identifier: Administrative			Transaction ID: H4.14119																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.39		130.48		203.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.37		391.79		612.16

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 30069			Allocated Activity or Event Year-To-Date 9598.62		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>		
Hartford	CT	06150			
Purpose of Disbursement: Copier maintenance fees			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.14120		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.27		324.04		506.31

B. Full Name (Last, First, Middle Initial) Bank of America			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15719			Allocated Activity or Event Year-To-Date 13842.14		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>		
Wilmington	DE	19886			
Purpose of Disbursement: Credit card payment			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.14133		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1527.67		2715.85		4243.52

C. Full Name (Last, First, Middle Initial) US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Theodore Francis Green Airport			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>		
Warwick	RI	02886			
Purpose of Disbursement: Aifare			Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.14177		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.57		431.23		673.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1709.94		3039.89		4749.83

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
East Greenwich Photo & Studio Inc

Mailing Address
631 Main Street

City	State	Zip Code
East Greenwich	RI	02818

Purpose of Disbursement:
Gifts - photographs

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14178

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.76		81.36		127.12

B. Full Name (Last, First, Middle Initial)
Providence Marriott

Mailing Address
Charles & Orms Street

City	State	Zip Code
Providence	RI	02906

Purpose of Disbursement:
Meeting 12/6/06

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14179

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.82		10.36		16.18

C. Full Name (Last, First, Middle Initial)
Capital Grille

Mailing Address
One Cookson Place

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting 12/9/06

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14180

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
258.32		459.23		717.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Picture This Mailing Address 158 Wickenden Street City State Zip Code Providence RI 02903 Purpose of Disbursement: Gifts - photographs Activity or Event Identifier: Administrative [MEMO ITEM]			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 25 / 2007 Transaction ID: H4.14181
--	--	--	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.61		361.96		565.57

B. Full Name (Last, First, Middle Initial) Yankee Spirits Inc Mailing Address 628 Washington Street City State Zip Code Attleboro MA 02703 Purpose of Disbursement: Hospitality supplies Activity or Event Identifier: Administrative [MEMO ITEM]			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 25 / 2007 Transaction ID: H4.14182
---	--	--	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
382.10		679.29		1061.39

C. Full Name (Last, First, Middle Initial) Hemenway's Seafood Mailing Address 1 Providence Washington Plaza City State Zip Code Providence RI 02903 Purpose of Disbursement: Meeting 12/12/06 Activity or Event Identifier: Administrative [MEMO ITEM]			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 25 / 2007 Transaction ID: H4.14183
--	--	--	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.69		29.66		46.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Ruth's Chris Steakhouse

Mailing Address
10 Memorial Blvd

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting 12/15/06

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 01 / 25 / 2007

Transaction ID: H4.14184

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.20		114.14		178.34

B. Full Name (Last, First, Middle Initial)
Hemenway's Seafood

Mailing Address
1 Providence Washington Plaza

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting 12/18/06

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 01 / 25 / 2007

Transaction ID: H4.14186

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.66		54.51		85.17

C. Full Name (Last, First, Middle Initial)
Providence Place Mall

Mailing Address
One Providence Place

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Staff appreciation

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 01 / 25 / 2007

Transaction ID: H4.14187

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.80		323.20		505.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Capital Grille			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address One Cookson Place			Allocated Activity or Event Year-To-Date _____ 0.00																		
City State Zip Code Providence RI 02903	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	1	D	D	2	5	Y	Y	Y	Y	2	0	0	7
M	M																				
0	1																				
D	D																				
2	5																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Meeting 12/21/06			Transaction ID: H4.14188																		
Activity or Event Identifier: Administrative [MEMO ITEM]																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.89		65.59		102.48

B. Full Name (Last, First, Middle Initial) Capriccio			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 2 Pine Street			Allocated Activity or Event Year-To-Date _____ 0.00																		
City State Zip Code Providence RI 02903	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	1	D	D	2	5	Y	Y	Y	Y	2	0	0	7
M	M																				
0	1																				
D	D																				
2	5																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Meeting 12/22/06			Transaction ID: H4.14190																		
Activity or Event Identifier: Administrative [MEMO ITEM]																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.86		40.64		63.50

C. Full Name (Last, First, Middle Initial) Chelo's of Providence			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 505 Silver Spring Avenue			Allocated Activity or Event Year-To-Date _____ 0.00																		
City State Zip Code Providence RI 02904	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	1	D	D	2	5	Y	Y	Y	Y	2	0	0	7
M	M																				
0	1																				
D	D																				
2	5																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Meeting 12/28/06			Transaction ID: H4.14191																		
Activity or Event Identifier: Administrative [MEMO ITEM]																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.66		18.95		29.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Old Ebbitt Grill

Mailing Address
675 15th Street. NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:
Meeting

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 01 / 03 / 2007

Transaction ID: H4.14192

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.73		45.73		71.46

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
300 South Riverside Plaza

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement:
Credit card payment

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14044.36

Activity or Event Identifier:
Administrative

Date 01 / 25 / 2007

Transaction ID: H4.14135

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.80		129.42		202.22

C. Full Name (Last, First, Middle Initial)
Capriccio

Mailing Address
2 Pine Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting 12/19/06

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 01 / 25 / 2007

Transaction ID: H4.14150

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.48		59.52		93.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.80		129.42		202.22

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
Theodore Francis Green Airport

City	State	Zip Code	Category/ Type
Warwick	RI	02886	

Purpose of Disbursement: DC airfare	Category/ Type
--	-------------------

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /

Transaction ID: H4.14153

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.34		301.06		470.40

B. Full Name (Last, First, Middle Initial)
Doubletree Guest Suites

Mailing Address
801 New Hampshire Ave NW

City	State	Zip Code	Category/ Type
Washington	DC	20037	

Purpose of Disbursement: Lodging	Category/ Type
-------------------------------------	-------------------

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /

Transaction ID: H4.14154

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.42		109.19		170.61

C. Full Name (Last, First, Middle Initial)
Timothy Grilo

Mailing Address
481 Charles Street

City	State	Zip Code	Category/ Type
Providence	RI	02904	

Purpose of Disbursement: Reimburse expenses	Category/ Type
--	-------------------

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
14844.97

Date / /

Transaction ID: H4.14139

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.38		52.22		81.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.38		52.22		81.60

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 15023

City State Zip Code
Worcester MA 01615

Purpose of Disbursement:
Reimburse cell phone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 15 / 2007

Transaction ID: H4.14156

Activity or Event Identifier:
Administrative

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
18.00 + 32.00 = 50.00

B. Full Name (Last, First, Middle Initial)
Preflight Airport Park

Mailing Address
2119 Post Road

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
Parking

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 18 / 2007

Transaction ID: H4.14157

Activity or Event Identifier:
Administrative

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
9.00 + 16.00 = 25.00

C. Full Name (Last, First, Middle Initial)
Brooks Pharmacy

Mailing Address
150 Mineral Spring Avenue

City State Zip Code
Pawtucket RI 02860

Purpose of Disbursement:
Office supplies

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 15 / 2007

Transaction ID: H4.14159

Activity or Event Identifier:
Administrative

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2.38 + 4.22 = 6.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Advantage Payroll			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 90 Jefferson Boulevard			Allocated Activity or Event Year-To-Date 15158.97		
City Warwick	State RI	Zip Code 02888	Date MM / DD / YYYY 01 / 30 / 2007		
Purpose of Disbursement: Processing fees			Transaction ID: H4.14111		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.04		200.96		314.00

B. Full Name (Last, First, Middle Initial) Rhode Island Convention Center			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Sabin Street			Allocated Activity or Event Year-To-Date 423.35		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 01 / 25 / 2007		
Purpose of Disbursement: Catering fee balance			Transaction ID: H4.14114		
Activity or Event Identifier: Hope Awards 2006(10/16/2006)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
381.01		42.34		423.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
494.05		243.30		737.35

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
5838.23		9744.09		15582.32

SCHEDULE H5 (FEC Form 3X)
TRANSFERS OF LEVIN FUNDS FOR
SHARED FEDERAL ELECTION ACTIVITY
(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

NAME OF ACCOUNT Levin Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 1463.87 Transaction ID: H5.14106
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BREAKDOWN OF THIS TRANSFER

		VOTER REGISTRATION	
i) Voter Registration	Total Amount Transferred for Voter Registration.....	0.00	
		VOTER ID	
ii) Voter ID	Total Amount Transferred for Voter ID.....	0.00	
		GOTV	
iii) GOTV	Total Amount Transferred for GOTV.....	0.00	
		GENERIC CAMPAIGN ACTIVITY	
iv) Generic Campaign Activity	Total Amount Transferred for Generic Campaign Activity.....	1463.87	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....	0.00
TOTAL This Period (Voter ID).....	0.00
TOTAL This Period (GOTV).....	0.00
TOTAL This Period (Generic Campaign Activity).....	1463.87
TOTAL This Period (Total Amount of Transfers Received).....	1463.87

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.14476

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee
NAME OF ACCOUNT Levin Account

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	1463.87	1463.87
e. Total.....	1463.87	1463.87
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	1463.87	1463.87
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	1463.87	1463.87
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	1463.87	1463.87
10. DISBURSEMENTS..... (From Line 6)	1463.87	1463.87
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		0.00

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 37 / 38
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input checked="" type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial) / Full Organization Name A. RI Democratic State Committee	Transaction ID: SBSL4D.14477 Date of Disbursement
Mailing Address PO Box 6004	<input type="text" value="01"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City State Zip Code Providence RI 02940	Amount of Each Disbursement this Period <input type="text" value="1463.87"/>
Purpose of Disbursement Levin fund transfer	Account: 8659

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1463.87"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1463.87"/>

Image# 27990496127

Form/Schedule: **F3XA** The loan on Schedule C has no determined due date and no interest rate.
Transaction ID:
