



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		29948.81
(b) Cash on Hand at Beginning of Reporting Period.....	29948.81	
(c) Total Receipts (from Line 19) .....	5610.65	5610.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35559.46	35559.46
7. Total Disbursements (from Line 31).....	15763.64	15763.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	19795.82	19795.82
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	5254.47	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Rhode Island Democratic State Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 01 / 31 / 2014

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(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).....	4.80	4.80
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4.80	4.80
12. Transfers From Affiliated/Other Party Committees.....	3220.00	3220.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	181.27	181.27
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	2204.58	2204.58
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	2204.58	2204.58
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5610.65	5610.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3406.07	3406.07

**DETAILED SUMMARY PAGE**

of Disbursements

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 .....	1777.72	1777.72
(ii) Non-Federal Share.....	6686.65	6686.65
(b) Other Federal Operating Expenditures .....	7299.27	7299.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15763.64	15763.64
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) 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)) ..	15763.64	15763.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9076.99	9076.99

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	4.80	4.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4.80	4.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	9076.99	9076.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	9076.99	9076.99

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

The Loan on Schedule C has no interest rate and no determined due date. No employees worked more than 25% on a federal campaign.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 21  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)  
**A. Jennifer Hills**

Mailing Address 118 Uncas Street

City Warwick State RI Zip Code 02889

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

Name of Employer W & Associates Occupation Legal Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 02 / 2014

Transaction ID : SA11AI.21604

Amount of Each Receipt this Period  
 5.00

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00

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

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

FOR LINE NUMBER: PAGE 8 OF 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**  
 Mailing Address P.O. Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4.80

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2014  
**Transaction ID : SA11C.21571**  
 Amount of Each Receipt this Period  
 4.80  
 Transfer

Full Name (Last, First, Middle Initial)  
**B.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

Full Name (Last, First, Middle Initial)  
**C.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4.80
<b>TOTAL</b> This Period (last page this line number only).....▶	4.80

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 9 OF 21	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. Democratic National Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 South Capitol St. SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : SA12.21601**

Amount of Each Receipt this Period  
3220.00

In-kind - Voter File Access

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

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

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3220.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**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  
Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2014

**Transaction ID : SB21B.21583**

Amount of Each Disbursement this Period

1861.56

Full Name (Last, First, Middle Initial)

**B. Jonathan Boucher**

Mailing Address 23 Perkins Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
Net wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

**Transaction ID : SB21B.21584**

Amount of Each Disbursement this Period

1483.40

Full Name (Last, First, Middle Initial)

**C. Democratic National Committee**

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind - Voter File Access

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

**Transaction ID : SB21B.21602**

Amount of Each Disbursement this Period

3220.00

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

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

6564.96

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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. United States Treasury**

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Federal Withholding tax deposit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Transaction ID : SB21B.21586

Amount of Each Disbursement this Period

656.19

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

656.19

7221.15

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

**LOANS**

NAME OF COMMITTEE (In Full) **Rhode Island Democratic State Committee** Transaction ID : **SC/9.5183**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Licht 88 Committee	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 / D D / Y Y Y Y Y Y

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate:  % (apr)

Secured:  Yes  No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5249.87
<b>TOTALS</b> 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 OF 21
	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 <b>SHELDON II WHITEHOUSE</b>	Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address PO BOX 40280	
City State Zip Code PROVIDENCE RI 02940	

Outstanding Balance Beginning This Period <input type="text" value="4.60"/>	<b>Transaction ID : SD9.14176</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="4.60"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="4.60"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="5249.87"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5254.47"/>

**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 MM / DD / YYYY 01 / 10 / 2014	TOTAL AMOUNT TRANSFERRED 2204.58
--	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	2204.58
<b>Transaction ID : H3.21600</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	2204.58
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	2204.58

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.21574</b> <b>Cox Communications</b>		Allocated Activity or Event: <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 _____ 68.05	
City State Zip Code Newark NJ 07101	Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Cable Service	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 68.05	
Activity or Event Identifier: <b>Administrative</b>		Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 14.29		_____ 53.76	
		_____ 68.05	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.21575</b> <b>Susann Della Rosa</b>		Allocated Activity or Event: <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 _____ 2118.05	
City State Zip Code Rumford RI 02916	Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Accounting Services - Non employee	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 2118.05	
Activity or Event Identifier: Administrative		Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 430.50		_____ 1619.50	
		_____ 2050.00	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.21577</b> <b>Division of Taxation</b>		Allocated Activity or Event: <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 Capitol Hill		Allocated Activity or Event Year-To-Date _____ 2196.17	
City State Zip Code Providence RI 02908	Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: State payroll taxes	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 2196.17	
Activity or Event Identifier: Administrative		Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 16.41		_____ 61.71	
		_____ 78.12	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 461.20		_____ 1734.97		_____ 2196.17

**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
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) <b>Postmaster</b>		Transaction ID : <b>H4.21579</b>	Allocated Activity or Event: <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 Turnkey Station			Allocated Activity or Event Year-To-Date 2396.17	
City Providence	State RI	Zip Code 02940	Date 01 / 12 / 2014	
Purpose of Disbursement: Annual Bulk Mail fee				
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
42.00			158.00	200.00

B. Full Name (Last, First, Middle Initial) <b>Verizon</b>		Transaction ID : <b>H4.21581</b>	Allocated Activity or Event: <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 1100			Allocated Activity or Event Year-To-Date 2765.57	
City Albany	State NY	Zip Code 12250	Date 01 / 12 / 2014	
Purpose of Disbursement: Telephone Service				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
77.57			291.83	369.40

C. Full Name (Last, First, Middle Initial) <b>151 Broadway Associates</b>		Transaction ID : <b>H4.21588</b>	Allocated Activity or Event: <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 151 Broadway			Allocated Activity or Event Year-To-Date 3415.57	
City Providence	State RI	Zip Code 02903	Date 01 / 12 / 2014	
Purpose of Disbursement: Rent and utilities				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
136.50			513.50	650.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.07		963.33		1219.40

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.21589</b> <b>Providence Newspaper Guild</b> Mailing Address 270 Westminster Street		Allocated Activity or Event: <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	
City State Zip Code Providence RI 02903	Allocated Activity or Event Year-To-Date 4265.57		
Purpose of Disbursement: Dinner Tickets and ad	<input type="checkbox"/> Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="178.50"/> + <input type="text" value="671.50"/> = <input type="text" value="850.00"/>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.21590</b> <b>David Caprio</b> Mailing Address One Center Place		Allocated Activity or Event: <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	
City State Zip Code Providence RI 02903	Allocated Activity or Event Year-To-Date 5324.45		
Purpose of Disbursement: Reimbursement	<input type="checkbox"/> Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="222.36"/> + <input type="text" value="836.52"/> = <input type="text" value="1058.88"/>			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.21593</b> <b>Hilton New Orleans Riverside</b> Mailing Address Two Poydras Street		Allocated Activity or Event: <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	
City State Zip Code New Orleans LA 70130	Allocated Activity or Event Year-To-Date 0.00		
Purpose of Disbursement: Lodging	<input type="checkbox"/> Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="115.45"/> + <input type="text" value="434.30"/> = <input type="text" value="549.75"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="400.86"/>		<input type="text" value="1508.02"/>		<input type="text" value="1908.88"/>

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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) <b>NGP Van</b>		Transaction ID : <b>H4.21594</b>		Allocated Activity or Event: <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 1101 15th Street, NW				Allocated Activity or Event Year-To-Date 0.00	
City Washington	State DC	Zip Code 20005	Date 11 / 12 / 2013		
Purpose of Disbursement: Voter File Enhancement		Category/ Type			
Activity or Event Identifier: <b>Administrative</b>					
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
68.92			259.28		
					=
					TOTAL AMOUNT
					328.20

B. Full Name (Last, First, Middle Initial) <b>Drago's Seafood Restaurant</b>		Transaction ID : <b>H4.21595</b>		Allocated Activity or Event: <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 Poydras Street				Allocated Activity or Event Year-To-Date 0.00	
City New Orleans	State LA	Zip Code 70130	Date 11 / 21 / 2013		
Purpose of Disbursement: Meals		Category/ Type			
Activity or Event Identifier: Administrative					
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
9.48			35.67		
					=
					TOTAL AMOUNT
					45.15

C. Full Name (Last, First, Middle Initial) <b>Arnaud's Restaurant</b>		Transaction ID : <b>H4.21597</b>		Allocated Activity or Event: <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 813 Rue Bienville				Allocated Activity or Event Year-To-Date 0.00	
City New Orleans	State LA	Zip Code 70112	Date 11 / 22 / 2013		
Purpose of Disbursement: Meals		Category/ Type			
Activity or Event Identifier: Administrative					
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
28.51			107.27		
					=
					TOTAL AMOUNT
					135.78

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)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CitiBusiness Card</b> Mailing Address PO Box 182564		<b>Transaction ID : H4.21592</b>	Allocated Activity or Event: <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
City Columbus	State OH	Zip Code 43210	Allocated Activity or Event Year-To-Date 5429.79 Date: 01 / 12 / 2014
Purpose of Disbursement: Credit Card Payment		Category/ Type	
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
22.34 + 83.00 = 105.34			

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Clear</b> Mailing Address Dept CH 14365		<b>Transaction ID : H4.21599</b>	Allocated Activity or Event: <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
City Palatine	State IL	Zip Code 60065	Allocated Activity or Event Year-To-Date 0.00 Date: 12 / 21 / 2013
Purpose of Disbursement: Internet Access		Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
22.34 + 83.00 = 105.34			

<b>C. Full Name (Last, First, Middle Initial)</b> <b>United States Treasury</b> Mailing Address PO Box 660351		<b>Transaction ID : H4.21587</b>	Allocated Activity or Event: <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
City Dallas	State TX	Zip Code 75266	Allocated Activity or Event Year-To-Date 5607.62 Date: 01 / 14 / 2014
Purpose of Disbursement: FUTA tax deposit		Category/ Type	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
37.34 + 140.49 = 177.83			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.68		223.49		283.17

**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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: United States Treasury, Transaction ID: H4.21580. Allocated Activity or Event: Administrative. Date: 01/15/2014. Total Amount: 656.19.

Form B: Department of Employment & Training, Transaction ID: H4.21576. Allocated Activity or Event: Administrative. Date: 01/28/2014. Total Amount: 140.00.

Form C: Extra Space Storage, Transaction ID: H4.21578. Allocated Activity or Event: Administrative. Date: 01/28/2014. Total Amount: 207.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 210.67, 792.52, 1003.19.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Verizon. Transaction ID: H4.21582. Allocated Activity or Event: Administrative. Date: 01/28/2014. Total Amount: 370.16.

Form B: Jonathan Boucher. Transaction ID: H4.21573. Allocated Activity or Event: Administrative. Date: 01/30/2014. Total Amount: 1483.40.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (389.24), NONFEDERAL SHARE (1464.32), TOTAL AMOUNT (1853.56).

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

Table with 3 columns: FEDERAL SHARE (1777.72), NONFEDERAL SHARE (6686.65), TOTAL AMOUNT (8464.37).