

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. Rhode Island Democratic State Committee

ADDRESS (number and street) P.O. Box 6004 Providence RI 02940

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 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 09/01/2012 through 09/30/2012

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 Jeffrey Padwa

Signature of Treasurer Jeffrey Padwa [Electronically Filed] Date 10/20/2012

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rhode Island Democratic State Committee

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2012"/>  |                         | 28398.73                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 36499.61                |                                   |
| (c) Total Receipts (from Line 19) .....  | 58555.85                | 286754.05                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 95055.46                | 315152.78                         |
| 7. Total Disbursements (from Line 31).....   | 52524.24                | 272621.56                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 42531.22                | 42531.22                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 5254.47                 |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Write or Type Committee Name

Rhode Island Democratic State Committee

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 1000.00                       | 19388.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 1000.00                       | 19388.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 21000.00                      | 36622.42                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 22000.00                      | 56010.42                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 25330.00                      | 151172.29                         |
| 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                          | 166.00                            |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 779.19                        | 779.19                            |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 10446.66                      | 78626.15                          |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 10446.66                      | 78626.15                          |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 58555.85                      | 286754.05                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 48109.19                      | 208127.90                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 5424.62                       | 44678.10                          |
| (ii) Non-Federal Share.....  | 9578.10                       | 79362.44                          |
| (b) Other Federal Operating Expenditures .....   | 22896.06                      | 69350.06                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 37898.78                      | 193390.60                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 250.00                            |
| 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 .....                           | 14625.46                      | 78980.96                          |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 14625.46                      | 78980.96                          |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 52524.24                      | 272621.56                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 42946.14                      | 193259.12                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 22000.00                      | 56010.42                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 22000.00                      | 56010.42                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 28320.68                      | 114028.16                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 166.00                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 28320.68                      | 113862.16                         |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

The loan on Schedule C has no interest rate and no determined due date. Schedule A Memos from joint fundraisers are distributed on a different schedule than proceeds. No other 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: (check only one) | PAGE 7 OF 40  |
| <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. Nancy Cloud**  
Full Name (Last, First, Middle Initial)  
Mailing Address 520 Beavertail Rd  
City Jamestown State RI Zip Code 02835-2815  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 12 / 2012**  
**Transaction ID : SA11AI.18797**  
Amount of Each Receipt this Period **1000.00**

**B. WENDE CORCORAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 STARLING WAY  
City WEST WARWICK State RI Zip Code 02893  
FEC ID number of contributing federal political committee. **C**  
Name of Employer OPERATION LIFE SAVER Occupation DIRECTOR OF EDUCATION  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date

Date of Receipt **07 / 05 / 2012**  
**Transaction ID : SA11AI.18847**  
Amount of Each Receipt this Period **32.00**  
Dollars For Democrats  
**[MEMO ITEM]**

**C. WENDE CORCORAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 STARLING WAY  
City WEST WARWICK State RI Zip Code 02893  
FEC ID number of contributing federal political committee. **C**  
Name of Employer OPERATION LIFE SAVER Occupation DIRECTOR OF EDUCATION  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date

Date of Receipt **08 / 06 / 2012**  
**Transaction ID : SA11AI.18848**  
Amount of Each Receipt this Period **32.00**  
Dollars For Democrats  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... **1000.00**  
**TOTAL** This Period (last page this line number only).....

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.18847

Dollars For Democrats

Form/Schedule: SA11AI

Transaction ID: SA11AI.18848

Dollars For Democrats



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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 9 OF 40  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

**A. WENDE CORCORAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 STARLING WAY  
City WEST WARWICK State RI Zip Code 02893  
FEC ID number of contributing federal political committee. **C**  
Name of Employer OPERATION LIFE SAVER Occupation DIRECTOR OF EDUCATION  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date

Date of Receipt 09 / 05 / 2012  
**Transaction ID : SA11AI.18849**  
Amount of Each Receipt this Period 32.00  
Dollars For Democrats  
**[MEMO ITEM]**

**B. DNC Services Corp**  
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

Date of Receipt 06 / 30 / 2012  
**Transaction ID : SA11AI.18845**  
Amount of Each Receipt this Period 1863.90  
RI Party Victory Fund Unitemized  
**[MEMO ITEM]**

**C. LUMINA GREENWAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17 CAMDEN CT  
City WAKEFIELD State RI Zip Code 02879  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date

Date of Receipt 07 / 10 / 2012  
**Transaction ID : SA11AI.18850**  
Amount of Each Receipt this Period 150.00  
Dollars For Democrats  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.18849

Dollars For Democrats

Form/Schedule: SA11AI

Transaction ID: SA11AI.18845

RI Party Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.18850

Dollars For Democrats

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 12 OF 40  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. LUMINA GREENWAY**

Mailing Address 17 CAMDEN CT

City State Zip Code  
WAKEFIELD RI 02879

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2012

Transaction ID : SA11AI.18851

Amount of Each Receipt this Period  
500.00

Dollars For Democrats

**[MEMO ITEM]**

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

Mailing Address 430 S CAPITOL ST SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation  
Dollars For Democrats

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

Transaction ID : SA11AI.18852

Amount of Each Receipt this Period  
1250.00

Dollars For Democrats

**[MEMO ITEM]**

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).....▶ | 1000.00 |

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.18851

Dollars For Democrats

Form/Schedule: SA11AI

Transaction ID: SA11AI.18852

Dollars For Democrats

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

|   |                              |   |   |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one)       | PAGE 14 OF 40   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)  
**A. AMGEN INC. POLITICAL ACTION COMMITTEE**

Mailing Address 601 13TH STREET, NW  
12TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 10 / 2012  
**Transaction ID : SA11C.18815**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 236 HOPE STREET

City PROVIDENCE State RI Zip Code 02906

FEC ID number of contributing federal political committee. **C** C00476564

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
11000.00

Date of Receipt  
09 / 17 / 2012  
**Transaction ID : SA11C.18813**

Amount of Each Receipt this Period  
11000.00

Transfer

Full Name (Last, First, Middle Initial)  
**C. OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)**

Mailing Address 33 ELMCROFT AVENUE

City PROVIDENCE State RI Zip Code 02908

FEC ID number of contributing federal political committee. **C** C00397067

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 24 / 2012  
**Transaction ID : SA11C.18764**

Amount of Each Receipt this Period  
5000.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 21000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 21000.00 |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 15 OF 40   |
| <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**

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 SOUTH CAPITOL STREET, SE  
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12110.00

Date of Receipt  
09 / 27 / 2012  
**Transaction ID : SA12.18811**

Amount of Each Receipt this Period  
12110.00

Transfer

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

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 ▼  
108260.00

Date of Receipt  
09 / 10 / 2012  
**Transaction ID : SA12.18765**

Amount of Each Receipt this Period  
10000.00

Transfer

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

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 ▼  
111480.00

Date of Receipt  
09 / 30 / 2012  
**Transaction ID : SA12.18842**

Amount of Each Receipt this Period  
3220.00

In-kind - Voter file access

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 25330.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 25330.00 |

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

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

FOR LINE NUMBER: PAGE 16 OF 40  
(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. VLM Cooperative Inc.**

Mailing Address PO Box 9

City Lexington State KY Zip Code 40588

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA17.18817**

Amount of Each Receipt this Period

Proceeds from license of voter file

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

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.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="779.19"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value="779.19"/> |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2012

**Transaction ID : SB21B.18798**

Amount of Each Disbursement this Period

325.54

Full Name (Last, First, Middle Initial)

**B. Enterprise Leasing**

Mailing Address 4202 Air Ramp Road

City Charlotte State NC Zip Code 28214

Purpose of Disbursement  
Car rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2012

**Transaction ID : SB21B.18798.0**

Amount of Each Disbursement this Period

325.54

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Chase Card Services**

Mailing Address PO Box 15153

City Wilmington State DE Zip Code 19886

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2012

**Transaction ID : SB21B.18805**

Amount of Each Disbursement this Period

1638.13

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

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

1963.67

**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. US Airways**

Mailing Address Theodore Francis Green Airport

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Embassy Suites**

Mailing Address 5400 Johnn Q. Hammons Drive, NW

City Concord State NC Zip Code 28027

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Citizens Bank**

Mailing Address One Citizens Plaza

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Wire fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2012

Transaction ID : **SB21B.18805.0**

Amount of Each Disbursement this Period

254.10

[MEMO ITEM]

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2012

Transaction ID : **SB21B.18805.1**

Amount of Each Disbursement this Period

1384.03

[MEMO ITEM]

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2012

Transaction ID : **SB21B.18783**

Amount of Each Disbursement this Period

18.00

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

18.00

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

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Citizens Bank**

Mailing Address One Citizens Plaza

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Bank fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2012

Transaction ID : **SB21B.18795**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. 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  
09 / 30 / 2012

Transaction ID : **SB21B.18843**

Amount of Each Disbursement this Period

3220.00

Full Name (Last, First, Middle Initial)

**C. Embassy Suites**

Mailing Address 5400 Johnn Q. Hammons Drive, NW

City Concord State NC Zip Code 28027

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2012

Transaction ID : **SB21B.18831**

Amount of Each Disbursement this Period

5169.39

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

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

8414.39

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. True North Communications**

Mailing Address 260 West Exchange Street

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Committee Research & Public Relations

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

09 / 19 / 2012

**Transaction ID : SB21B.18794**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**B.**

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

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

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

/  /

Amount of Each Disbursement this Period

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

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

12500.00

22896.06

**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. 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

/  /

**Transaction ID : SB30B.18784**

Amount of Each Disbursement this Period

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

/  /

**Transaction ID : SB30B.18785**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. 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

/  /

**Transaction ID : SB30B.18786**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Michael Childs**

Mailing Address 29 Phillips Street

City Providence State RI Zip Code 02906

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

M M M /  D D D /  Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SB30B.18823**

Amount of Each Disbursement this Period

1313.99

Full Name (Last, First, Middle Initial)

**B. Blake Collins**

Mailing Address 62 Ash Street

City Rehoboth State MA Zip Code 02769

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

M M M /  D D D /  Y Y Y Y Y Y  
09 / 14 / 2012

**Transaction ID : SB30B.18787**

Amount of Each Disbursement this Period

842.40

Full Name (Last, First, Middle Initial)

**C. Stephanie DeSilva Mandeville**

Mailing Address 41 Dover Street

City Providence State RI Zip Code 02908

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

M M M /  D D D /  Y Y Y Y Y Y  
09 / 14 / 2012

**Transaction ID : SB30B.18788**

Amount of Each Disbursement this Period

1525.07

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

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

3681.46

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Stephanie DeSilva Mandeville**

Mailing Address 41 Dover Street

City Providence State RI Zip Code 02908

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

/  /

**Transaction ID : SB30B.18789**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Division of Taxation**

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement  
State Payroll taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.18790**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Emily LaPlante**

Mailing Address 25 Magnum Ct

City Smithfield State RI Zip Code 02917

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

/  /

**Transaction ID : SB30B.18825**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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. Edwin Pacheco**

Mailing Address 12 Camp Dixie Road

City Pascoag State RI Zip Code 02859

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

/  /

**Transaction ID : SB30B.18791**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jesse Poon**

Mailing Address 36 Paine Road

City Cumberland State RI Zip Code 02864

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

/  /

**Transaction ID : SB30B.18819**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Alexandra Sanna**

Mailing Address 118 Maple Drive

City Tiverton State RI Zip Code 02878

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

/  /

**Transaction ID : SB30B.18827**

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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. Brenna Saucier**

Mailing Address 175 Sayles Avenue

City Pawtucket State RI Zip Code 02860

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

M  M /  D  D /  Y  Y  Y  Y  
09 / 28 / 2012

**Transaction ID : SB30B.18821**

Amount of Each Disbursement this Period

772.25

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Payroll tax deposit

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 14 / 2012

**Transaction ID : SB30B.18792**

Amount of Each Disbursement this Period

2205.87

Full Name (Last, First, Middle Initial)

**C.**

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

M  M /  D  D /  Y  Y  Y  Y

Amount of Each Disbursement this Period

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

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

2978.12

14625.46

**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)<br>Licht 88 Committee | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><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 27 OF 40   |
|   | 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<br><b>SHELDON II WHITEHOUSE</b> | Nature of Debt (Purpose):<br>Coordinated expenditures overage |
| Mailing Address 32 ELMGROVE AVENUE   |   |
| City State Zip Code<br>PROVIDENCE RI 02906   |   |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="4.60"/> | <b>Transaction ID : SD9.14176</b>                        |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>               | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><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<br><input type="text"/> |   |   |
| Amount Incurred This Period<br><input type="text"/>               | Payment This Period<br><input type="text"/> | Outstanding Balance at Close of This Period<br><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<br><input type="text"/> |   |   |
| Amount Incurred This Period<br><input type="text"/>               | Payment This Period<br><input type="text"/> | Outstanding Balance at Close of This Period<br><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                   | DATE OF RECEIPT                  | TOTAL AMOUNT TRANSFERRED |
|-----------------------------------|----------------------------------|--------------------------|
| RI Democratic Non-federal Account | MM / DD / YYYY<br>09 / 14 / 2012 | 6645.05                  |

**BREAKDOWN OF TRANSFER RECEIVED**

|  |         |
|--|---------|
| <b>i) Total Administrative</b> .....   | 6645.05 |
| <b>Transaction ID : H3.18829</b>   |         |
| <b>ii) Generic Voter Drive</b> .....   |         |
| <b>iii) Exempt Activities</b> .....  |         |
| <b>iv) Direct Fundraising (List Activity or Event Identifier)</b>            |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Fundraising .....                     |         |
| <b>v) Direct Candidate Support (List Activity or Event Identifier)</b>       |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Candidate Support.....                |         |
| <b>vi) Public Communications Referring Only to Party (Made by PAC)</b> ..... |         |

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

|  |  |
|--|--|
| <b>TOTAL</b> This Period (Administrative) .....                                |  |
| <b>TOTAL</b> This Period (Generic Voter Drive) .....                           |  |
| <b>TOTAL</b> This Period (Exempt Activities) .....                             |  |
| <b>TOTAL</b> This Period (Direct Fundraising) .....                            |  |
| <b>TOTAL</b> This Period (Direct Candidate Support) .....                      |  |
| <b>TOTAL</b> This Period (Public Communications Referring Only to Party) ..... |  |
| <b>TOTAL</b> 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 | MM / DD / YYYY<br>09 / 26 / 2012 | 3801.61                  |

**BREAKDOWN OF TRANSFER RECEIVED**

|  |         |
|--|---------|
| <b>i) Total Administrative</b> .....   | 3801.61 |
| <b>Transaction ID : H3.18830</b>   |         |
| <b>ii) Generic Voter Drive</b> .....   |         |
| <b>iii) Exempt Activities</b> .....  |         |
| <b>iv) Direct Fundraising (List Activity or Event Identifier)</b>            |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Fundraising .....                     |         |
| <b>v) Direct Candidate Support (List Activity or Event Identifier)</b>       |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Candidate Support.....                |         |
| <b>vi) Public Communications Referring Only to Party (Made by PAC)</b> ..... |         |

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

|  |          |
|--|----------|
| <b>TOTAL</b> This Period (Administrative) .....                                | 10446.66 |
| <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).....                       | 10446.66 |

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.18767
A T & T Mobility
Mailing Address PO Box 536216
City Atlanta State GA Zip Code 30353
Purpose of Disbursement: Cell phone service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 109185.50
Date: 09/13/2012
FEDERAL SHARE: 53.16 NONFEDERAL SHARE: 94.52 TOTAL AMOUNT: 147.68

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.18773
Division of Taxation
Mailing Address One Capitol Hill
City Providence State RI Zip Code 02908
Purpose of Disbursement: State payroll taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 109314.10
Date: 09/13/2012
FEDERAL SHARE: 46.30 NONFEDERAL SHARE: 82.30 TOTAL AMOUNT: 128.60

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.18774
EMC Insurance
Mailing Address PO Box 7911
City Warwick State RI Zip Code 02887
Purpose of Disbursement: Property/Liability Insurance
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 110438.10
Date: 09/13/2012
FEDERAL SHARE: 404.64 NONFEDERAL SHARE: 719.36 TOTAL AMOUNT: 1124.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 504.10, 896.18, 1400.28

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**

|  |                   |  |  |
|--|-------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.18778</b><br><b>Lexisnexis</b> |                   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address PO Box 7247-7090   |                   | Allocated Activity or Event Year-To-Date<br>_____ 110611.10  |  |
| City Philadelphia State PA Zip Code 19170  | Category/<br>Type | Date <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>   |  |
| Purpose of Disbursement: Subscription<br>Activity or Event Identifier: Administrative            |                   | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>_____ 62.28      _____ 110.72      _____ 173.00   |  |

|   |                   |  |  |
|---|-------------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.18832</b><br><b>CitiBusiness Card</b> |                   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address PO Box 182564   |                   | Allocated Activity or Event Year-To-Date<br>_____ 110764.93  |  |
| City Columbus State OH Zip Code 43210   | Category/<br>Type | Date <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>   |  |
| Purpose of Disbursement: Credit Card Payment<br>Activity or Event Identifier: Administrative            |                   | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>_____ 55.38      _____ 98.45      _____ 153.83  |  |

|  |                   |  |  |
|--|-------------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.18836</b><br><b>Clear</b>                    |                   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address Dept CH 14365  |                   | Allocated Activity or Event Year-To-Date<br>_____ 0.00   |  |
| City Palatine State IL Zip Code 60065  | Category/<br>Type | Date <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>   |  |
| Purpose of Disbursement: Internet access<br>Activity or Event Identifier: Administrative<br><b>[MEMO ITEM]</b> |                   | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>_____ 55.38      _____ 98.45      _____ 153.83  |  |

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

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| _____ 117.66  |   | _____ 209.17     |   | _____ 326.83 |

**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 : H4.18766</b><br><b>151 Broadway Associates</b><br>Mailing Address 151 Broadway |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| City State Zip Code<br>Providence RI 02903  | Allocated Activity or Event Year-To-Date<br>111414.93 |  |  |
| Purpose of Disbursement:<br>Rent and utilities  | <input type="checkbox"/> Category/<br>Type            | Date <input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>   |  |
| Activity or Event Identifier:<br><b>Administrative</b>  |   |  |  |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT   |   |  |  |
| <input type="text" value="234.00"/> + <input type="text" value="416.00"/> = <input type="text" value="650.00"/>                               |   |  |  |

|   |   |  |  |
|---|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.18769</b><br><b>Blue Cross Blue Shield of Rhode Island</b><br>Mailing Address PO Box 1057 |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| City State Zip Code<br>Providence RI 02901  | Allocated Activity or Event Year-To-Date<br>113053.56 |  |  |
| Purpose of Disbursement:<br>Health Insurance  | <input type="checkbox"/> Category/<br>Type            | Date <input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>   |  |
| Activity or Event Identifier:<br>Administrative   |   |  |  |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT   |   |  |  |
| <input type="text" value="589.91"/> + <input type="text" value="1048.72"/> = <input type="text" value="1638.63"/>   |   |  |  |

|  |   |  |  |
|--|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.18772</b><br><b>Susann Della Rosa</b><br>Mailing Address 60 Don Avenue |   | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| City State Zip Code<br>Rumford RI 02916  | Allocated Activity or Event Year-To-Date<br>114153.56 |  |  |
| Purpose of Disbursement:<br>Accounting services - non employee   | <input type="checkbox"/> Category/<br>Type            | Date <input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>   |  |
| Activity or Event Identifier:<br>Administrative  |   |  |  |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  |   |  |  |
| <input type="text" value="396.00"/> + <input type="text" value="704.00"/> = <input type="text" value="1100.00"/>                         |   |  |  |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|                                      |   |                                      |   |                                      |
|--------------------------------------|---|--------------------------------------|---|--------------------------------------|
| FEDERAL SHARE                        | + | NONFEDERAL SHARE                     | = | TOTAL AMOUNT                         |
| <input type="text" value="1219.91"/> |   | <input type="text" value="2168.72"/> |   | <input type="text" value="3388.63"/> |

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)<br><b>Arthur Handy</b> |             | Transaction ID : <b>H4.18776</b> |                        | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address 26 Welfare Avenue                                 |             |                                  |                        | Allocated Activity or Event Year-To-Date<br>115576.81  |                |
| City<br>Cranston  | State<br>RI | Zip Code<br>02910                | Date<br>09 / 14 / 2012 |  |                |
| Purpose of Disbursement:<br>Net wages                             |             | Category/<br>Type                |                        |  |                |
| Activity or Event Identifier:<br><b>Administrative</b>            |             |                                  |                        |  |                |
| FEDERAL SHARE   |             | +                                | NONFEDERAL SHARE       |  | = TOTAL AMOUNT |
| 512.37  |             |                                  | 910.88                 |  | 1423.25        |

|   |             |                                  |                        |  |                |
|---|-------------|----------------------------------|------------------------|--|----------------|
| B. Full Name (Last, First, Middle Initial)<br><b>United States Treasury</b> |             | Transaction ID : <b>H4.18781</b> |                        | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 660351   |             |                                  |                        | Allocated Activity or Event Year-To-Date<br>116370.43  |                |
| City<br>Dallas  | State<br>TX | Zip Code<br>75266                | Date<br>09 / 14 / 2012 |  |                |
| Purpose of Disbursement:<br>Payroll tax deposit                             |             | Category/<br>Type                |                        |  |                |
| Activity or Event Identifier:<br>Administrative                             |             |                                  |                        |  |                |
| FEDERAL SHARE   |             | +                                | NONFEDERAL SHARE       |  | = TOTAL AMOUNT |
| 285.70  |             |                                  | 507.92                 |  | 793.62         |

|  |             |                                  |                        |  |                |
|--|-------------|----------------------------------|------------------------|--|----------------|
| C. Full Name (Last, First, Middle Initial)<br><b>Verizon</b> |             | Transaction ID : <b>H4.18782</b> |                        | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address P.O. Box 1100                                |             |                                  |                        | Allocated Activity or Event Year-To-Date<br>116769.09  |                |
| City<br>Albany   | State<br>NY | Zip Code<br>12250                | Date<br>09 / 14 / 2012 |  |                |
| Purpose of Disbursement:<br>Telephone service                |             | Category/<br>Type                |                        |  |                |
| Activity or Event Identifier:<br>Administrative              |             |                                  |                        |  |                |
| FEDERAL SHARE  |             | +                                | NONFEDERAL SHARE       |  | = TOTAL AMOUNT |
| 143.52   |             |                                  | 255.14                 |  | 398.66         |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 941.59        |   | 1673.94          |   | 2615.53      |

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><br><b>United States Treasury</b> |  | <b>Transaction ID : H4.18796</b> | <b>Allocated Activity or Event:</b>   |                                     |
| Mailing Address PO Box 660351  |  |                                  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                                     |
| City State Zip Code<br>Dallas TX 75266   |  |                                  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                                     |
| Purpose of Disbursement:<br>FUTA tax deposit                                       |  |                                  | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                                     |
| Activity or Event Identifier:<br><b>Administrative</b>                             |  | Category/<br>Type                | Allocated Activity or Event Year-To-Date<br>117049.09   |                                     |
|  |  |                                  | Date <input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>              |                                     |
| FEDERAL SHARE  |  | +                                | NONFEDERAL SHARE  | = TOTAL AMOUNT                      |
| <input type="text" value="100.80"/>  |  |                                  | <input type="text" value="179.20"/>   | <input type="text" value="280.00"/> |

|  |  |                                  |   |                                     |
|--|--|----------------------------------|---|-------------------------------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>A T &amp; T Mobility</b> |  | <b>Transaction ID : H4.18768</b> | <b>Allocated Activity or Event:</b>   |                                     |
| Mailing Address PO Box 536216  |  |                                  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                                     |
| City State Zip Code<br>Atlanta GA 30353  |  |                                  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                                     |
| Purpose of Disbursement:<br>Cell phone service                                   |  |                                  | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                                     |
| Activity or Event Identifier:<br>Administrative                                  |  | Category/<br>Type                | Allocated Activity or Event Year-To-Date<br>117184.26   |                                     |
|  |  |                                  | Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>              |                                     |
| FEDERAL SHARE  |  | +                                | NONFEDERAL SHARE  | = TOTAL AMOUNT                      |
| <input type="text" value="48.66"/>   |  |                                  | <input type="text" value="86.51"/>  | <input type="text" value="135.17"/> |

|  |  |                                  |   |                                    |
|--|--|----------------------------------|---|------------------------------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Cox Communications</b> |  | <b>Transaction ID : H4.18771</b> | <b>Allocated Activity or Event:</b>   |                                    |
| Mailing Address P.O. Box 39  |  |                                  | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |                                    |
| City State Zip Code<br>Newark NJ 07101   |  |                                  | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |                                    |
| Purpose of Disbursement:<br>Cable service                                      |  |                                  | <input type="checkbox"/> Public Comm (ref to party only) by PAC   |                                    |
| Activity or Event Identifier:<br>Administrative                                |  | Category/<br>Type                | Allocated Activity or Event Year-To-Date<br>117249.89   |                                    |
|  |  |                                  | Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>              |                                    |
| FEDERAL SHARE  |  | +                                | NONFEDERAL SHARE  | = TOTAL AMOUNT                     |
| <input type="text" value="23.63"/>   |  |                                  | <input type="text" value="42.00"/>  | <input type="text" value="65.63"/> |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|                                     |   |                                     |   |                                     |
|-------------------------------------|---|-------------------------------------|---|-------------------------------------|
| FEDERAL SHARE                       | + | NONFEDERAL SHARE                    | = | TOTAL AMOUNT                        |
| <input type="text" value="173.09"/> |   | <input type="text" value="307.71"/> |   | <input type="text" value="480.80"/> |

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)<br><b>Extra Space Storage</b> |             | Transaction ID : H4.18775 | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address 1640 Hartford Avenue                                     |             |                           | Allocated Activity or Event Year-To-Date<br>117442.89  |  |
| City<br>Johnston   | State<br>RI | Zip Code<br>02919         | Date<br>09 / 26 / 2012   |  |
| Purpose of Disbursement:<br>Storage rental                               |             | Category/<br>Type         | Date<br>09 / 26 / 2012   |  |
| Activity or Event Identifier:<br>Administrative                          |             |                           |  |  |
| FEDERAL SHARE  |             | +                         | NONFEDERAL SHARE   |  |
| 69.48  |             |                           | 123.52   |  |
|  |             | =                         | TOTAL AMOUNT   |  |
|  |             |                           | 193.00   |  |

|   |             |                           |  |  |
|---|-------------|---------------------------|--|--|
| B. Full Name (Last, First, Middle Initial)<br><b>Postmaster</b> |             | Transaction ID : H4.18780 | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address Turnkey Station                                 |             |                           | Allocated Activity or Event Year-To-Date<br>117578.89  |  |
| City<br>Providence  | State<br>RI | Zip Code<br>02940         | Date<br>09 / 26 / 2012   |  |
| Purpose of Disbursement:<br>Post office box annual rental       |             | Category/<br>Type         | Date<br>09 / 26 / 2012   |  |
| Activity or Event Identifier:<br>Administrative                 |             |                           |  |  |
| FEDERAL SHARE   |             | +                         | NONFEDERAL SHARE   |  |
| 48.96   |             |                           | 87.04  |  |
|   |             | =                         | TOTAL AMOUNT   |  |
|   |             |                           | 136.00   |  |

|   |             |                           |  |  |
|---|-------------|---------------------------|--|--|
| C. Full Name (Last, First, Middle Initial)<br><b>Jonathan Boucher</b> |             | Transaction ID : H4.18801 | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address 23 Perkins Street                                     |             |                           | Allocated Activity or Event Year-To-Date<br>117832.99  |  |
| City<br>Warwick   | State<br>RI | Zip Code<br>02886         | Date<br>09 / 26 / 2012   |  |
| Purpose of Disbursement:<br>Reimbursement                             |             | Category/<br>Type         | Date<br>09 / 26 / 2012   |  |
| Activity or Event Identifier:<br>Administrative                       |             |                           |  |  |
| FEDERAL SHARE   |             | +                         | NONFEDERAL SHARE   |  |
| 91.48   |             |                           | 162.62   |  |
|   |             | =                         | TOTAL AMOUNT   |  |
|   |             |                           | 254.10   |  |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 209.92        |   | 373.18           |   | 583.10       |

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)<br><b>US Airways</b> |             | Transaction ID : <b>H4.18803</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |              |
| Mailing Address Theodore Francis Green Airport                  |             |                                  |                  | Allocated Activity or Event Year-To-Date<br>0.00   |   |              |
| City<br>Warwick   | State<br>RI | Zip Code<br>02886                |                  | Date<br>09 / 01 / 2012   |   |              |
| Purpose of Disbursement:<br>Airfare                             |             | Category/<br>Type                |                  |  |   |              |
| Activity or Event Identifier:<br><b>Administrative</b>          |             |                                  |                  |  |   |              |
| [MEMO ITEM]   |             |                                  |                  |  |   |              |
| FEDERAL SHARE   |             | +                                | NONFEDERAL SHARE |  | = | TOTAL AMOUNT |
| 91.48   |             |                                  | 162.62           |  |   | 254.10       |

|  |             |                                  |                  |  |   |              |
|--|-------------|----------------------------------|------------------|--|---|--------------|
| B. Full Name (Last, First, Middle Initial)<br><b>Blake Collins</b> |             | Transaction ID : <b>H4.18802</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |              |
| Mailing Address 62 Ash Street                                      |             |                                  |                  | Allocated Activity or Event Year-To-Date<br>118087.09  |   |              |
| City<br>Rehoboth   | State<br>MA | Zip Code<br>02769                |                  | Date<br>09 / 26 / 2012   |   |              |
| Purpose of Disbursement:<br>Reimbursement                          |             | Category/<br>Type                |                  |  |   |              |
| Activity or Event Identifier:<br>Administrative                    |             |                                  |                  |  |   |              |
| FEDERAL SHARE  |             | +                                | NONFEDERAL SHARE |  | = | TOTAL AMOUNT |
| 91.48  |             |                                  | 162.62           |  |   | 254.10       |

|   |             |                                  |                  |  |   |              |
|---|-------------|----------------------------------|------------------|--|---|--------------|
| C. Full Name (Last, First, Middle Initial)<br><b>US Airways</b> |             | Transaction ID : <b>H4.18804</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |              |
| Mailing Address Theodore Francis Green Airport                  |             |                                  |                  | Allocated Activity or Event Year-To-Date<br>0.00   |   |              |
| City<br>Warwick   | State<br>RI | Zip Code<br>02886                |                  | Date<br>09 / 01 / 2012   |   |              |
| Purpose of Disbursement:<br>Airfare                             |             | Category/<br>Type                |                  |  |   |              |
| Activity or Event Identifier:<br>Administrative                 |             |                                  |                  |  |   |              |
| [MEMO ITEM]   |             |                                  |                  |  |   |              |
| FEDERAL SHARE   |             | +                                | NONFEDERAL SHARE |  | = | TOTAL AMOUNT |
| 91.48   |             |                                  | 162.62           |  |   | 254.10       |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 91.48         |   | 162.62           |   | 254.10       |

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: Chase Card Services. Transaction ID: H4.18833. Allocated Activity or Event: Administrative. Date: 09/26/2012. Total Amount: 374.00.

Form B: Providence Journal. Transaction ID: H4.18838. Allocated Activity or Event: Administrative. Date: 09/26/2012. Total Amount: 96.00.

Form C: United Airlines. Transaction ID: H4.18839. Allocated Activity or Event: Administrative. Date: 09/26/2012. Total Amount: 60.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 158.27, 215.73, 374.00.

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: 158.27, 215.73, 374.00.

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><br><b>Constant Contact</b><br>Mailing Address 1601 Trapelo Road<br>City Waltham State MA Zip Code 02451<br>Purpose of Disbursement: E mail marketing<br>Activity or Event Identifier: <b>Administrative</b><br>[MEMO ITEM] |  | <b>Transaction ID : H4.18840</b><br>Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC<br>Allocated Activity or Event Year-To-Date: 0.00<br>Date: 09 / 26 / 2012<br>Category/Type: |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>61.20 + 108.80 = 170.00   |  |  |

|   |  |  |
|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Surveymonkey.com</b><br>Mailing Address 285 Hamilton Avenue<br>City Palo Alto State CA Zip Code 94301<br>Purpose of Disbursement: Software<br>Activity or Event Identifier: Administrative<br>[MEMO ITEM] |  | <b>Transaction ID : H4.18841</b><br>Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC<br>Allocated Activity or Event Year-To-Date: 0.00<br>Date: 09 / 26 / 2012<br>Category/Type: |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>17.28 + 30.72 = 48.00  |  |  |

|  |  |   |
|--|--|---|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>TJX Rewards/GEGRB</b><br>Mailing Address PO Box 530949<br>City Atlanta State GA Zip Code 30353<br>Purpose of Disbursement: Credit Card Payment<br>Activity or Event Identifier: Administrative |  | <b>Transaction ID : H4.18834</b><br>Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC<br>Allocated Activity or Event Year-To-Date: 121242.61<br>Date: 09 / 26 / 2012<br>Category/Type: |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT<br>1001.35 + 1780.17 = 2781.52   |  |   |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1001.35       |   | 1780.17          |   | 2781.52      |

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: Embassy Suites. Transaction ID: H4.18837. Mailing Address: 5400 Johnn Q. Hammons Drive, NW, Concord, NC 28027. Purpose: Lodging. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 09/07/2012. Amounts: FEDERAL SHARE 1001.35, NONFEDERAL SHARE 1780.17, TOTAL AMOUNT 2781.52.

Form B: Blake Collins. Transaction ID: H4.18770. Mailing Address: 62 Ash Street, Rehoboth, MA 02769. Purpose: Net wages. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 09/28/2012. Amounts: FEDERAL SHARE 303.26, NONFEDERAL SHARE 539.14, TOTAL AMOUNT 842.40.

Form C: Arthur Handy. Transaction ID: H4.18777. Mailing Address: 26 Welfare Avenue, Cranston, RI 02910. Purpose: Net wages. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 09/28/2012. Amounts: FEDERAL SHARE 512.37, NONFEDERAL SHARE 910.88, TOTAL AMOUNT 1423.25.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 815.63, 1450.02, 2265.65.

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

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.18779**  
**Edwin Pacheco**  
Mailing Address 12 Camp Dixie Road

City Pascoag State RI Zip Code 02859

Purpose of Disbursement: Net wages

Activity or Event Identifier: **Administrative**

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

Allocated Activity or Event Year-To-Date: 124040.54

Date: 09 / 28 / 2012

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 191.62        |   | 340.66           |   | 532.28       |

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

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

Allocated Activity or Event Year-To-Date:

Date: / /

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|               |   |                  |   |              |

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

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

Allocated Activity or Event Year-To-Date:

Date: / /

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|               |   |                  |   |              |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 191.62        |   | 340.66           |   | 532.28       |

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 |
| 5424.62       |  | 9578.10          |  | 15002.72     |