Image# 15970273228 PAGE 1 / 24

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTTIM OX FO	or Other Than An Au	inorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Rhode Island Democrat	tic State Committee		
ADDRESS (number and street)	P.O. Box 6004		
Check if different			
than previously reported. (ACC)	Providence		RI 02940 –
2. FEC IDENTIFICATION NUI	MBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00136200		S THIS REPORT X (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20	(Non-Election Year Only)
(a) Quarterly Reports:	App	r 20 (M4) Jul 20 (I	Year Only)
April 15 Quarterly Report (Q1			
July 15 Quarterly Report (Q2	(C) 12-Day	Primary (12P) Convention (12C)	General (12G) Runoff (12R) Special (12S)
October 15 Quarterly Report (Q3	·		
January 31 Year-End Report (YE	E) Electi	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	on on	in the State of
5. Covering Period 01	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through 0	1 31 2015
I certify that I have examined this	s Report and to the best o	f 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 01 / 19 / 2015
NOTE: Submission of false, erroned	ous, or incomplete informatio	on may subject the person sign	ing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

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: 01 01 2015 To: 01 31 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		23625.83
	(b) Cash on Hand at Beginning of Reporting Period	23625.83	
	(c) Total Receipts (from Line 19)	39165.92	39165.92
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62791.75	62791.75
7.	Total Disbursements (from Line 31)	45399.75	45399.75
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17392.00	17392.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	5254.47	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	28181.33	

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Rhode Island Democratic State Committee

R	eport Covering the Period: From: 01	01 2015 To	: 01 / 01 / 2015
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
12	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	0.00	0.00
12.	Party Committees	8220.00	8220.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
47	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	30945.92	30945.92
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	30945.92	30945.92
10	Total Descripts (add Lines 44/d)		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	39165.92	39165.92
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	8220.00	8220.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Jaionaa Tour to Date		
Activity (from Schedule H4)	0000.04	0000.04		
(i) Federal Share	8029.34	8029.34		
(ii) Non-Federal Share	20646.82	20646.82		
(b) Other Federal Operating				
Expenditures	9028.19	9028.19		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	37704.35	37704.35		
Transfers to Affiliated/Other Party				
CommitteesContributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures	7 7 7			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(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 Defined				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
i i		200		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	7695.40	7695.40		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	7695.40	7695.40		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	45399.75	45399.75		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	24752.93	24752.93		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	17057.53	17057.53
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	17057.53	17057.53

1mage# 15970273233 PAGE 6 / 24

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: F3XN Transaction ID:

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

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 24 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Rhode Island Democratic State	Committ	ee	
Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 South Capitol St. SE City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation	Zip Code 20003 0010603 1 Year-to-Date ▼	Date of Receipt O1 20 2015 Transaction ID: SA12.23548 Amount of Each Receipt this Period 5000.00 Transfer
Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 South Capitol St. SE City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation	Zip Code 20003 0010603 1 Year-to-Date ▼	Date of Receipt 01 31 2015 Transaction ID : SA12.23557 Amount of Each Receipt this Period 3220.00 In-kind - Voter File Access
Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Year-to-Date ▼	, and at Each recept this Ferious
SUBTOTAL of Receipts This Page (optional)			8220.00

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

8220.00

S ľ

S			PAGE	8	OF	24								
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	\ I	(check	k only	one)	_	٦		1			
			Summary Page		X	21b 27	22 28a	\perp	23 28b		24 28c	25 29		26 30b
_				Щ.										
	ly information copied from such Reports and Statem for commercial purposes, other than using the name													3
\setminus	NAME OF COMMITTEE (In Full)													
	Rhode Island Democratic State Co	mmittee)											
_	Full Name (Last, First, Middle Initial)													
Α.	A. Jonathan Boucher						Date	of Di	sburse			Y	Y	
	Mailing Address 23 Perkins Street						01			5	L	2015	_	
	City	State	Zip Code				Tror		ion ID	. 01	B21B.23	E40		
	Warwick	RI	02886				IIai	isaci	טו ווטו.	. 31	DZ I D.Z3	1340		
	Purpose of Disbursement Net Wages						Amou	nt of	Each	Dis	burseme	ent this	Perio	od
	Candidate Name				ategor Type	y/						162	9.44	П
	Office Sought: House Disbursen	nent For:			1,00				7		7			
	Senate	Primary	General											
		Other (spe	cify) 🔻											
_	State: District:													
D	Full Name (Last, First, Middle Initial)						Doto	of D	ماريد		a+			
В.	Democratic National Committee								sburse					
	Mailing Address 430 South Capitol St. SE						01	_		D 81	/ Y	2015	Y	
	•	State	Zip Code				Trai	nsact	ion ID	: S	B21B.23	3558		
	Washington Purpose of Disbursement	DC	20003											
	In-kind - Voter File Access						Amou	nt of	Each	Dis	burseme	ent this	Perio	od
	Candidate Name			Ca	tegor	y/			-			222	0.00	
					Туре			-	7		7	322	0.00	
	Office Sought: House Disbursen		C											
		Primary Other (spe	General											
	State: District:	Other (spec	ony) 🔻											
_	Full Name (Last, First, Middle Initial)													
C.	Department of Employment & Train	ning					Date	of Di	sburse	emei	nt			
	Mailing Address One Capitol Hill						01	M /		^D 4	/ Y	2015	Y	
	City	State	Zip Code											
	Providence	RI	02908				Tran	ısacı	ion ID	: S	B21B.23	3545		
	Purpose of Disbursement State Unemployment Taxes				-									
	Candidate Name						Amou	nt of	Each	Dis	burseme	ent this	Perio	bc
	Candidate Name				ategor Type	y/						59	8.50	П
	Office Sought: House Disbursen	nent For:			,,,,,	$\overline{}$,		7			
	Senate	Primary	General											
	President	Other (spe	cify) 🔻											
	State: District:													
8	UBTOTAL of Disbursements This Page (optional)								-			5447	7.94	
F							-	+	7		7			=
Т	OTAL This Period (last page this line number only)					•			,		7			

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SCHEDULE B (FEC Form 3X)			PAGE 9 OF	24	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(Greek Grily Gree)			
	Detailed Summary Page	X 21b	22	23 24 25	26
Г		27	28a	28b 28c 29	30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full)					
Rhode Island Democratic State Co	mmittee				
Full Name (Last, First, Middle Initial)					
A. Anne Pease			Date of D	isbursement	
Mailing Address 75 Signal Way			01	15 2015	
City	State Zip Code		Transac	tion ID : SB21B.23541	
East Greenwich	RI 02818		Transac	11011 10 . 302 10.23341	
Purpose of Disbursement Net Wages			Amount of	f Each Disbursement this Perio	d
Candidate Name		Category/ Type		987.62	
Office Sought: House Disburser	nent For:	71			
Senate	Primary General				
State: President State:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. United States Treasury			Date of D	isbursement	
- Officed States Treasury			M = M	/ D D / Y Y Y Y	
Mailing Address PO Box 660351			01	15 2015	
City S Dallas	State Zip Code TX 75266		Transac	tion ID : SB21B.23544	
Purpose of Disbursement	75200				
Federal Payroll Tax Deposit			Amount of	Each Disbursement this Perio	d
Candidate Name		Category/		2462.97	П
Office Sought: House Disburser	nont For:	Туре		7	_
Senate Disburser	Primary General				
President	Other (specify)				
State: District:	•				
Full Name (Last, First, Middle Initial)					
C.			Date of D	isbursement	
Moiling Address			M = M	/ D D / Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
		Amount of	Each Disbursement this Perio	d	
Candidate Name		Category/ Type			٦
Office Sought: House Disburser	nent For:	<u> </u>			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)				3450.59	
					=
TOTAL This Period (last page this line number only)		·····		8898.53	╝

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:		NUMBER: PAGE 10 OF 24	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)
	Detailed Summary Page	21b	22 23 24 25 26
		27	28a 28b 28c 29 X 30
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar			
	ne and address of any poin	licar committee to	Solicit contributions from Such committee.
NAME OF COMMITTEE (In Full)			
Rhode Island Democratic State Co	ommittee		
Full Name (Last, First, Middle Initial)			
A. Department of Employment & Trail	ning		Date of Disbursement
Mailing Address One Capitol Hill			01 24 2015
City	State Zip Code		T ID ODGGD 00540
Providence	RI 02908		Transaction ID : SB30B.23546
Purpose of Disbursement State Unemployment Taxes			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	6338.40
	ment For:		
Senate	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Date of Disbursement
B. United States Treasury			
Mailing Address PO Box 660351			01 05 2015
City	State Zip Code		
Dallas	TX 75266		Transaction ID : SB30B.23519
Purpose of Disbursement			
FUTA Tax Deposit			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1177.00
Office Sought: House Disburser	ment For:	1,772	,
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailian Adduses			M M / D D / Y Y Y Y Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Fulpose of Disbulsement			
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	
Office Sought: House Disburse	ment For:	.,,,,	7
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
'			
SUBTOTAL of Disbursements This Page (optional)		·····	7515.40
		· · ·	
TOTAL This Period (last page this line number only))		7515.40

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule for each category of the Detailed Summary Pace

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X

ME OF COMMITTEE (In Fu		ommittee	Transaction ID : SC/9.5183
LOAN SOURCE Full Nam Licht 88 Committee			Election: Primary General
Mailing Address 350 Cole A	venue		Other (specify) ▼
City Providence		State RI Z	IP Code 02906
Original Amount of Loan		Cumulative Payme	ent To Date Balance Outstanding at Close of This Perio
7	5249.87	7	0.00 5249.87
TERMS Date Incurre	nd.	Date	e Due Interest Rate Secured:
12 31 Y	1988	M = M / D = D	0.00 % (apr) Yes X No
List All Endorsers or Gua	rantors (if any) t	o Loan Source	
1. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, N	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, N	/liddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
JBTOTALS This Period This	s Page (optional)		5249.87
DTALS This Period (last pag	ge in this line only	y)	5249.87
arry outstanding balance or	nly to LINE 3, Sci	nedule D, for this li	ne. 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)

FOR LINE NUMBER: (check only one)

PAGE

12 OF

X	9
	10

24

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Coordinated expenditures overage SHELDON II WHITEHOUSE Mailing Address PO BOX 40280 State Zip Code **PROVIDENCE** 02940 Transaction ID: SD9.14176 Outstanding Balance Beginning This Period 4.60 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4.60 0.00 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 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 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 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 4.60 1) SUBTOTALS This Period This Page (optional)..... 4.60 2) TOTALS This Period (last page this line number only)..... 5249.87 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...... 5254.47 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

24

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Con	nmittee	
A. Full Name (Last, First, Middle Initial) of Debte BrushFire Strategies	or or Creditor	Nature of Debt (Purpose): Generic GOTV Phone Calls
Mailing Address 3000 K Street NW		
City State Washington	Zip Code DC 20007	
Outstanding Balance Beginning This Period 28181.33		Transaction ID : SD10.23509
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	28181.33
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)		28181.33
2) TOTALS This Period (last page this line numbe	r only)	28181.33
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate	28181.33	

Image# 15970273241 14 OF 24

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee
Transaction ID: H1.23517
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Tixed Percentage (Select One)
Presidential-Only Election Year (28% Federal)
Tresidential-Only Election real (20% rederal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non Procidential and Non Canata Floation Voor (15% Fodoral)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check
or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal %
70
Nonfederal
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only
Administrative Generic Voter Drive Public Communications Referencing Party Only

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

PAGE	15	OF	24	
	NE 1	92 OE	EODM	2V

	DF COMMITTEE (In Full) land Democratic State Committee		
NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI D	emocratic Non-federal Account	01 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	15750.81
BRE	AKDOWN OF TRANSFER RECEIVED		
i)	Total Administrative		15750.81
'			Transaction ID : H3.23552
lii)	Generic Voter Drive		
iii)	Exempt Activities		
iv)	Direct Fundraising (List Activity or Event Iden	tifier)	
	2)		
	a)		
	b)		
		7	
	c) Total Amount Transferred For Direct Fundra	sina	
			, , ,
v)	Direct Candidate Support (List Activity or Eve	ent identifier)	
	2)		
	a)	7	
	b)		
	c) Total Amount Transferred For Direct Candid	ate Support	
vi)	Public Communications Referring Only to F	arty (Made by PAC)	
•	TOTALS FO	R BREAKDOWN OF TRANSFER RECEIVE	D
TOTAL	This Pariod (Administrative)		
IOIAL	This Period (Administrative)		
TOTAL	This Period (Generic Voter Drive)		
IOIAL	This I endu (defield votel blive)		
ΤΟΤΔΙ	This Period (Exempt Activities)		
	(_/		
TOTAL	This Period (Direct Fundraising)		
	,		
TOTAL	This Period (Direct Candidate Support)		
TOTAL	This Period (Public Communications Referring	Only to Party)	
TOTAL	This Period (Total Amount Transferred)		

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

PAGE	16	OF	24	
FOR LI	NF 1	8a ∩F	FORM	ЗX

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	01 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	6819.61
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		6819.61 Transaction ID : H3.23553
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event I	dentifier)	
a)		
b)		
	draising	
v) Direct Candidate Support (List Activity or	Event Identifier)	
a)		
b)		
c) Total Amount Transferred For Direct Can	didate Support	
vi) Public Communications Referring Only t	o Party (Made by PAC)	
TOTALS	FOR BREAKDOWN OF TRANSFER RECEIVE	ED
TOTAL This Period (Administrative)		,
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)	,	
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referri	ng Only to Party)	
TOTAL This Period (Total Amount Transferred)		

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

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NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	01	8375.50
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		. 8375.50
		Transaction ID : H3.23554
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Ide	ntifier)	
	,	
a)		
b)		
c) Total Amount Transferred For Direct Fundra		
v) Direct Candidate Support (List Activity or Ev	vent Identifier)	
3)		
a)		
b)		
	, , , , , , , , , , , , , , , , , , , ,	
c) Total Amount Transferred For Direct Candid	date Support	
vi) Public Communications Referring Only to	Party (Made by PAC)	
TOTALS FO	OR BREAKDOWN OF TRANSFER RECEIV	/ED
TOTAL This Period (Administrative)		30945.92
, , ,		
TOTAL This Period (Generic Voter Drive)		0.00
		0.00
TOTAL This Period (Exempt Activities)		0.00
TOTAL This Period (Direct Fundraising)		0.00
TOTAL THIS Feriod (Birect Fundalising)		
TOTAL This Period (Direct Candidate Support)		0.00
	Г	
TOTAL This Period (Public Communications Referring	Only to Party)	0.00
		30945.92
TOTAL This Period (Total Amount Transferred)		330 18.52

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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Α.	hode Island Democratic State (Full Name (Last, First, Middle Initial)		n ID : H4.23520		Allocat	ed Activity or	Event:	
••	United States Treasury					dministrative	Fundraisin	g Exemp
	Mailing Address PO Box 660351							
	5 1 0 20X 000001				_ Vo	oter Drive	Direct Car	ididate Suppor
	City	State	Zip Code		Pı	ublic Comm (r	ef to party or	nly) by PAC
	Dallas	TX	75266	I	Alloc	ated Activity of	or Event Year	-To-Date
	Purpose of Disbursement: FUTA Tax Deposit							625.16
	Activity or Event Identifier:			0.1				Y
	Administrative			Category/ Type	Date	01	05	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TO	TAL AMOUN	Γ
	175.06		7	450.10				625.16
 3.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23521		Allocat	ed Activity or	Event:	
	30 Kennedy Partners				X	dministrative	Fundraisin	a Exemp
	Mailing Address 30 Kennedy Plaza					oter Drive	_	didate Suppor
	City	State	Zip Code		D PI	ublic Comm (r	ef to party or	nly) by PAC
	Providence	RI	02903		Alloc	ated Activity of	or Event Year	-To-Date
	Purpose of Disbursement: Rent							1225.16
	Activity or Event Identifier: Administrative							
	Administrative			Category/ Type	Date	01	13	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TO	TAL AMOUN	Γ
	168.00		7	432.00				600.00
	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.23522		Allocate	ed Activity or	Event:	
	RICOH USA, Inc.				X	dministrative	Fundraisin	g Exemp
	Mailing Address Five Dedrick Place					oter Drive	Direct Can	didate Suppor
	City	State	Zip Code		☐ Pı	ublic Comm (r	ef to party or	ly) by PAC
	West Caldwell	NJ	07006		Alloc	ated Activity of	r Event Year-	-To-Date
	Purpose of Disbursement: Copier Maintenance					7		1312.14
	Activity or Event Identifier: Administrative			Category/		M = M /	D D /	Y Y Y Y
				Type	Date	01	13	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TO	TAL AMOUN	Γ
	24.35	1 🗆		62.63	1 [86.98
			, , , , , , , , , , , , , , , , , , , ,			, , , , , , , , , , , , , , , , , , , ,		
su	BTOTAL of Allocated Federal and NonFede	•	Ü					
SU	IBTOTAL of Allocated Federal and NonFede FEDERAL SHARE	ral Activity Th	is Page NONFEDERAL	SHARE	_=_	TO	TAL AMOUNT	-
SU		•	Ü	SHARE 944.73] =] [TO	TAL AMOUNT	1312.14

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23523		Allocate	ed Activity or	Event:	
	CitiBusiness Card				\times	dministrative	Fundraising	Exemp
	Mailing Address PO Box 182564					oter Drive		didate Suppor
	City	State	Zip Code		☐ Pi	ublic Comm (ref to party onl	y) by PAC
	Columbus	ОН	43210		Alloc	ated Activity	or Event Year-	To-Date
	Purpose of Disbursement: Credit Card Payment						1	367.13
	Activity or Event Identifier: Administrative			Category/ Type	Date	M M /	13 / Y	2015
	FEDERAL CHARE		NONEEDEDAL		=		OTAL AMOUNT	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	. —	10	OTAL AMOUNT	
	15.40	<u> </u>	7	39.59		,		54.99
3.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23556		l	ed Activity or	Event:	
	Clear				X A	dministrative	Fundraising	Exemp
	Mailing Address Dept CH 14365				U Vo	oter Drive	Direct Cand	didate Suppor
	City	State	Zip Code		Pi	ublic Comm	ref to party onl	y) by PAC
	Palatine	IL	60065		Alloc	cated Activity	or Event Year-	To-Date
	Purpose of Disbursement: Internet Access							0.00
	Activity or Event Identifier: Administrative			Category/ Type	Date	12 /	21 Y	2014
	[MEMO ITEM]							
	FEDERAL SHARE	+	NONFEDERAL	SHARE	. —	10	OTAL AMOUNT	
	39.59	J L	7 7	15.40	JЬ		7	54.99
) .	Full Name (Last, First, Middle Initial) Intrepid Web Solutions, LLC	Transaction	n ID : H4.23524			ed Activity or dministrative	Event: Fundraising	Exemp
	Mailing Address PO Box 7227					oter Drive		didate Suppor
	City	State	Zip Code		D Pu	ublic Comm (ref to party onl	y) by PAC
	Lowell	MA	01852		Alloc	ated Activity	or Event Year-	To-Date
	Purpose of Disbursement: Web Site Maintenance						1	817.13
	Activity or Event Identifier: Administrative			Category/ Type	Date	M M /	13 / Y	2015
	Administrative			71	Date			
			NONEEDEDAL	CHARE	L	т/	TAL ANACHINIT	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TC	OTAL AMOUNT	
		-	NONFEDERAL	SHARE 324.00	-] [TO	OTAL AMOUNT	450.00
su	FEDERAL SHARE		7 7] [TO	OTAL AMOUNT	450.00
SU	FEDERAL SHARE		7 7	324.00			OTAL AMOUNT	450.00
su	FEDERAL SHARE 126.00 IBTOTAL of Allocated Federal and NonFeder	ral Activity Th	is Page	324.00				450.00 504.99

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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١.	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.23525		Allocate	ed Activity or	r Event:	
	National Grid				X Ad	dministrative	Fundraisi	ng Exemp
	Mailing Address Processing Center				U Vo	oter Drive	Direct Ca	ndidate Suppor
	City Woburn	State MA	Zip Code		Pı	ublic Comm	(ref to party o	only) by PAC
	Purpose of Disbursement:	IVIA	01807		Alloc	ated Activity	or Event Yea	r-To-Date
	Electricity							1918.58
	Activity or Event Identifier:			Catagamy		M = M /	D D /	Y . Y . Y . Y
	Administrative			Category/ Type	Date	01	13	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	T	OTAL AMOUN	IT
	28.41		7 7	73.04		,		101.45
3.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23526			ed Activity or		
	Postmaster				X Ad	dministrative	Fundraisi	ng Exemp
	Mailing Address Turnkey Station				U Vo	oter Drive	Direct Ca	ndidate Suppor
	City	State	Zip Code		Pı	ublic Comm	(ref to party o	only) by PAC
	Providence	RI	02940	I	Alloc	ated Activity	or Event Yea	r-To-Date
	Purpose of Disbursement: Annual Bulk Rate Fee							2138.58
	Activity or Event Identifier: Administrative							
	Autilitistiative			Category/ Type	Date	01	13	2015
					- 5.115			
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	T	OTAL AMOUN	IT
	FEDERAL SHARE 61.60	+	NONFEDERAL	SHARE 158.40		Т	OTAL AMOUN	IT 220.00
·.			NONFEDERAL] [To ded Activity or		
) .	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla	Transactio	7 7		= Allocate		Event:	220.00
>.	Full Name (Last, First, Middle Initial)	Transactio	7 7		= Allocate	ed Activity or	Event:	220.00
·	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City	Transactio nd	n ID : H4.23527 Zip Code		Allocate	ed Activity or dministrative oter Drive	Event:	220.00 ng Exemp
···	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence	Transactio nd	n ID : H4.23527		Allocate Allocate Vo	ed Activity or dministrative oter Drive	Event: Fundraisin Direct Ca	220.00 ng Exemp ndidate Suppor
> .	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City	Transactio nd	n ID : H4.23527 Zip Code		Allocate Allocate Vo	ed Activity or dministrative oter Drive	Event: Fundraisin Direct Ca	220.00 ng Exemp ndidate Suppor
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement:	Transactio nd	n ID : H4.23527 Zip Code		Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm ated Activity	Fundraisin Direct Ca (ref to party of or Event Yea	220.00 ng Exempore and Exempor
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier:	Transactio nd	n ID : H4.23527 Zip Code	158.40	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm ated Activity	Fundraisin Direct Ca (ref to party o	220.00 ng Exemporndidate Suppornly) by PAC r-To-Date 4792.30
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier:	Transactio nd	n ID : H4.23527 Zip Code	Category/ Type	Allocate According to the second sec	ed Activity or dministrative oter Drive ublic Comm ated Activity	Fundraisin Direct Ca (ref to party of or Event Yea	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative	Transactio nd State RI	In ID: H4.23527 Zip Code 02901	Category/ Type	Allocate According to the property of the pro	ed Activity or dministrative oter Drive ublic Comm ated Activity	Fundraisin Direct Ca (ref to party of or Event Yea)	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE	Transactio nd State RI	zip Code 02901	Category/ Type	Allocate According to the property of the pro	ed Activity or dministrative oter Drive ublic Comm ated Activity	Fundraisin Direct Ca (ref to party of or Event Yea)	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative	Transactio nd State RI	zip Code 02901	Category/ Type SHARE 1910.68	Allocate According to the property of the pro	ed Activity or dministrative oter Drive ublic Commeated Activity	Fundraisin Direct Ca (ref to party of or Event Yea)	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30 Y 2015
-	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE 743.04 BTOTAL of Allocated Federal and NonFederal	Transactio nd State RI +	n ID : H4.23527 Zip Code 02901 NONFEDERAL	Category/ Type SHARE 1910.68	Allocate According to the property of the pro	ed Activity or dministrative oter Drive ublic Commeated Activity	Fundraisin Direct Ca (ref to party o or Event Yea 13 OTAL AMOUN	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30
su	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Isla Mailing Address PO Box 1057 City Providence Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE 743.04 BTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	Transactiond State RI + Al Activity The	Zip Code 02901 NONFEDERAL	Category/ Type SHARE 1910.68 SHARE 2142.12	Allocate Vo Pt Alloc Date =	ed Activity or dministrative oter Drive ublic Commated Activity	Fundraisin Direct Ca (ref to party o or Event Yea 13 OTAL AMOUN	220.00 ng Exemp ndidate Suppor nly) by PAC r-To-Date 4792.30 Y 2015 IT 2653.72

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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۹.	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.23528		Allocate	ed Activity or	Event:	
	Susann Della Rosa					dministrative	Fundraisin	g Exemp
	Mailing Address 60 Don Avenue					oter Drive		ndidate Suppor
	City	State	Zip Code		Pu	ublic Comm (ref to party or	nly) by PAC
	Rumford	RI	02916	Ι	Alloc	ated Activity	or Event Year	-To-Date
	Purpose of Disbursement: Accounting Services Non Employee						, ,	7892.30
	Activity or Event Identifier:							
	Administrative			Category/ Type	Date	M M /	13	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TC	OTAL AMOUN	Т
	868.00		, , ,	2232.00				3100.00
3.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23529			ed Activity or	Event:	
	Verizon				X Ad	dministrative	Fundraisin	g Exemp
	Mailing Address P.O. Box 1100				U Vo	oter Drive	Direct Car	ndidate Suppor
	City	State	Zip Code		Pı	ublic Comm (ref to party or	nly) by PAC
	Albany	NY	12250		Alloc	ated Activity	or Event Year	-To-Date
	Purpose of Disbursement: Internet Service							7907.23
	Activity or Event Identifier: Administrative			Category/		M M /	D D /	Y Y Y Y Y
	/ tariiriida ativo			Type	Doto	01	13	2015
				Турс	Date			
	FEDERAL SHARE	+	NONFEDERAL		=		OTAL AMOUN	Т
	FEDERAL SHARE 4.18	·	NONFEDERAL				OTAL AMOUN	T 14.93
) .	4.18 Full Name (Last, First, Middle Initial)		NONFEDERAL	SHARE	= Allocate	To ed Activity or	Event:	14.93
) .	Full Name (Last, First, Middle Initial) Postmaster		7 7	SHARE	= Allocate	TO ed Activity or dministrative	Event: Fundraisin	14.93 g Exemp
>.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station		n ID : H4.23530	SHARE	= Allocate	To ed Activity or	Event: Fundraisin	14.93 g Exemp
··	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City	Transactio	n ID : H4.23530 Zip Code	SHARE	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm (Event: Fundraisin Direct Car ref to party or	14.93 g Exempondidate Support
).	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence	Transactio	n ID : H4.23530	SHARE	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm (Event: Fundraisin Direct Car	14.93 g Exempondidate Support
) .	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage	Transactio	n ID : H4.23530 Zip Code	SHARE	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm (Event: Fundraisin Direct Car ref to party or or Event Year	14.93 g Exempondidate Support
) .	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement:	Transactio	n ID : H4.23530 Zip Code	SHARE	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm (Event: Fundraisin Direct Car ref to party or or Event Year	g Exemple Exem
>.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier: Administrative	Transactio	In ID: H4.23530 Zip Code 02940	SHARE 10.75 Category/ Type	Allocate Allocate According to the second	ed Activity or dministrative oter Drive ublic Comm (stated Activity	Event: Fundraisin Direct Car ref to party or or Event Year	g Exempondidate Supportally) by PAC -To-Date 8005.23
D .	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier:	State RI	n ID : H4.23530 Zip Code	SHARE 10.75 Category/ Type	Allocate Allocate According to the second	ed Activity or dministrative oter Drive ublic Comm (stated Activity	Event: Fundraisin Direct Car ref to party or or Event Year	g Exempted addidate Supported by PAC -To-Date 8005.23
· ·	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier: Administrative	State RI	In ID: H4.23530 Zip Code 02940	Category/ Type	Allocate Allocate According to the second	ed Activity or dministrative oter Drive ublic Comm (stated Activity	Event: Fundraisin Direct Car ref to party or or Event Year	g Exempondidate Supportally) by PAC -To-Date 8005.23
	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier: Administrative	State RI	n ID : H4.23530 Zip Code 02940 NONFEDERAL	Category/ Type SHARE 70.56	Allocate Allocate According to the second	ed Activity or dministrative oter Drive ublic Comm (eated Activity)	Event: Fundraisin Direct Car ref to party or or Event Year	g Exemporadidate Supporally) by PAC -To-Date 8005.23
	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier: Administrative FEDERAL SHARE 27.44 BETOTAL of Allocated Federal and NonFeder	State RI +	n ID : H4.23530 Zip Code 02940 NONFEDERAL	Category/ Type SHARE 70.56	Allocate Allocate According to the property of the property	ed Activity or dministrative oter Drive ublic Comm (eated Activity)	Event: Fundraisin Direct Car ref to party or or Event Year 13 DTAL AMOUN	g Exemporadidate Supporally) by PAC -To-Date 8005.23
SU	Full Name (Last, First, Middle Initial) Postmaster Mailing Address Turnkey Station City Providence Purpose of Disbursement: Committee Postage Activity or Event Identifier: Administrative FEDERAL SHARE 27.44 BTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	State RI +	n ID : H4.23530 Zip Code 02940 NONFEDERAL iis Page NONFEDERAL	Category/ Type SHARE 70.56 SHARE 2313.31	Allocate Allocate Action Pu Allocate Pu Allocate Pu Allocate Pu	ed Activity or dministrative oter Drive ublic Comm (cated Activity	Event: Fundraisin Direct Car ref to party or or Event Year 13 DTAL AMOUN	g Exemple didate Supported by PAC -To-Date 8005.23

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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١.	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.23532			ed Activity or		
	Shuster Realty				X A	dministrative	Fundrais	ing Exemp
	Mailing Address 1769 Elmwood Avenue				U Vo	oter Drive	Direct Ca	andidate Suppor
	City	State	Zip Code		☐ Pi	ublic Comm	(ref to party of	only) by PAC
	Warwick Purpose of Disbursement:	RI	02888		Alloc	ated Activity	or Event Yea	ar-To-Date
	Rent						- 7	11005.23
	Activity or Event Identifier:			Category/		M = M /	D D /	Y Y Y Y
	Administrative			Type	Date	01	13	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	T	OTAL AMOU	NT
	840.00		7 7	2160.00		, ,	,	3000.00
3.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23531			ed Activity or		
	United States Treasury				X A	dministrative	Fundrais	ing Exemp
	Mailing Address PO Box 660351				U Vo	oter Drive	Direct Ca	andidate Suppor
	City	State	Zip Code		D Pi	ublic Comm	(ref to party of	only) by PAC
	Dallas Purpose of Disbursement:	TX	75266		Alloc	cated Activity	or Event Yea	ar-To-Date
	Federal Payroll Tax Deposit							20380.40
	Activity or Event Identifier: Administrative			Category/		M = M /	D D /	Y
				Type	Date	01	15	2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	Т	OTAL AMOU	NT
	FEDERAL SHARE 2625.06		NONFEDERAL	SHARE 6750.11] [T	OTAL AMOU	NT 9375.17
> .			NONFEDERAL			To the desired Activity or		
) .	2625.06 Full Name (Last, First, Middle Initial) Verizon		7 7		Allocate		Event:	9375.17
> .	2625.06 Full Name (Last, First, Middle Initial)		7 7		Allocate X Ac	ed Activity or	Event:	9375.17
· ·	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City	Transactio	7 7		Allocate Allocate Vo	ed Activity or dministrative oter Drive	Event:	9375.17 ing Exemp
···	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany	Transactio	n ID : H4.23533		Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm	Event: Fundraisi Direct Ca	9375.17 ing Exemple Ex
· ·	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City	Transactio	n ID : H4.23533 Zip Code		Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm	Fundraisi Direct Ca (ref to party of	9375.17 ing Exemple andidate Support
·	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier:	Transactio	n ID : H4.23533 Zip Code	6750.11	Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm	Fundraisi Direct Ca (ref to party of the continuous of the continu	9375.17 ing Exemple E
· ·	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service	Transactio	n ID : H4.23533 Zip Code		Allocate Allocate Vo	ed Activity or dministrative oter Drive ublic Comm	Fundraisi Direct Ca (ref to party of	9375.17 ing Exemple andidate Support only) by PAC ar-To-Date
	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier:	Transactio	n ID : H4.23533 Zip Code	Category/ Type	Allocate X Ac Vc Pt Alloc	ed Activity or dministrative oter Drive ublic Comm cated Activity	Fevent: Fundraisi Direct Ca (ref to party of or Event Yea	9375.17 ing Exemple E
· .	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier: Administrative	State NY	In ID: H4.23533 Zip Code 12250	Category/ Type	Allocate Allocate Vo Pt Allocate Date	ed Activity or dministrative oter Drive ublic Comm cated Activity	Fundraisi Direct Ca (ref to party of or Event Year)	9375.17 ing Exemple andidate Support only) by PAC ar-To-Date 20424.58
	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier: Administrative FEDERAL SHARE	State NY	n ID : H4.23533 Zip Code 12250 NONFEDERAL	Category/ Type	Allocate Allocate Vo Pt Allocate Date	ed Activity or dministrative oter Drive ublic Comm cated Activity	Fundraisi Direct Ca (ref to party of or Event Year)	9375.17 ing Exemple E
	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier: Administrative FEDERAL SHARE 12.37 BTOTAL of Allocated Federal and NonFeder	State NY	n ID : H4.23533 Zip Code 12250 NONFEDERAL	Category/ Type SHARE	Allocate Allocate Vo Pt Allocate Date	ed Activity or dministrative oter Drive ublic Comm cated Activity	Fevent: Fundraisi Direct Ca (ref to party of or Event Yea 22 OTAL AMOUN	9375.17 ing Exemple E
	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier: Administrative FEDERAL SHARE	State NY +	n ID : H4.23533 Zip Code 12250 NONFEDERAL	Category/ Type SHARE	Allocate Allocate Vo Pt Allocate Date	ed Activity or dministrative oter Drive ublic Comm cated Activity	Fundraisi Direct Ca (ref to party of or Event Year)	9375.17 ing Exemple E
SU	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany Purpose of Disbursement: Internet Service Activity or Event Identifier: Administrative FEDERAL SHARE 12.37 BTOTAL of Allocated Federal and NonFeder	State NY + ral Activity Th +	n ID : H4.23533 Zip Code 12250 NONFEDERAL July Spage NONFEDERAL	Category/ Type SHARE 31.81 SHARE 8941.92	Allocate Vo Alloc Date =	ed Activity or dministrative oter Drive ublic Comm rated Activity	Fevent: Fundraisi Direct Ca (ref to party of or Event Yea 22 OTAL AMOUN	9375.17 ing Exemption Exe

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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	hode Island Democratic State C				
۱.	Full Name (Last, First, Middle Initial)		n ID : H4.23534		Allocated Activity or Event:
	Department of Employment &	Training			Administrative Fundraising Exemp
	Mailing Address One Capitol Hill				Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Providence Purpose of Disbursement:	RI	02908		Allocated Activity or Event Year-To-Date
	State Unemployment Taxes				25079.44
	Activity or Event Identifier: Administrative			Category/ Type	Date 01 24 2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	1303.36		7 7	3351.50	4654.86
١.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.23536		Allocated Activity or Event:
	Providence Newspaper Guild				Administrative Fundraising Exemp
	Mailing Address 270 Westminster Street				Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Providence	RI	02903		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Follies Table				25929.44
	Activity or Event Identifier: Administrative			Category/ Type	Date 01 25 2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	238.00		, , ,	612.00	850.00
	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.23537		Allocated Activity or Event:
	Jonathan Boucher				Administrative Fundraising Exemp
	Mailing Address 23 Perkins Street				Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Warwick Purpose of Disbursement:	RI	02886		Allocated Activity or Event Year-To-Date
	Net Wages				27558.88
	Activity or Event Identifier: Administrative			Category/ Type	Date 01 30 2015
	FEDERAL SHARE	+	NONFEDERAL		= TOTAL AMOUNT
	456.24		TOTAL ESCAPA	1173.20	1629.44
	150.24		7 7	1170.20	1020.11
sι	BTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	al Activity Th	is Page NONFEDERAL	SHARE	= TOTAL AMOUNT
	1997.60			5136.70	7134.30
	TAL This Period (last page for each line only	/)(Federal sh	are to 21(a)(i) and	l NonFederal sh	are to 21(a)(ii))
TC	FEDERAL SHARE				

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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				Allocated Activity or Event:
				Administrative Fundraising Exempt
				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
East Greenwich	RI	02818		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Net Wages				28546.50
Administrative			Type	Date 01 30 2015
FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
276.53		7 1 7	711.09	987.62
	Transaction	n ID : H4.23539		Allocated Activity or Event: Administrative Fundraising Exempt
				Administrative Fundraising Exempt Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Providence	RI	02908		- Allocated Activity or Event Year-To-Date
Purpose of Disbursement: State Payroll Taxes				28676.16
Activity or Event Identifier: Administrative			Category/	M M / D D / Y Y Y Y Y
			Type	Date 01 30 2015
FEDERAL SHARE	+	NONFEDERAL	, , , , , , , , , , , , , , , , , , ,	= TOTAL AMOUNT
FEDERAL SHARE 36.30		NONFEDERAL	, , , , , , , , , , , , , , , , , , ,	Date
	Ė	NONFEDERAL	SHARE	= TOTAL AMOUNT 129.66 Allocated Activity or Event:
36.30	+	NONFEDERAL	SHARE	= TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt
36.30 Full Name (Last, First, Middle Initial)	+ State	NONFEDERAL 7 Zip Code	SHARE	= TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt
Full Name (Last, First, Middle Initial) Mailing Address		7 1 7	SHARE	TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	SHARE	TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
Full Name (Last, First, Middle Initial) Mailing Address City		7 1 7	SHARE	TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:		7 1 7	SHARE 93.36 Category/ Type	TOTAL AMOUNT 129.66 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
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:	State	Zip Code	SHARE 93.36 Category/ Type	TOTAL AMOUNT 129.66 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
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State	Zip Code	SHARE 93.36 Category/ Type	TOTAL AMOUNT 129.66 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
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFeder	State +	Zip Code NONFEDERAL 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SHARE 93.36 Category/ Type SHARE	TOTAL AMOUNT 129.66 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 TOTAL AMOUNT
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	State +	Zip Code NONFEDERAL	SHARE 93.36 Category/ Type SHARE	TOTAL AMOUNT 129.66 Allocated Activity or Event: Administrative Fundraising Exempt Direct Candidate Support Direct Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFeder FEDERAL SHARE 312.83	State + al Activity Th +	Zip Code NONFEDERAL is Page NONFEDERAL	SHARE 93.36 Category/ Type SHARE 804.45	TOTAL AMOUNT 129.66 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 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	State + al Activity Th +	Zip Code NONFEDERAL is Page NONFEDERAL	SHARE 93.36 Category/ Type SHARE 804.45	TOTAL AMOUNT 129.66 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 M M / D D / Y Y Y Y Y Date TOTAL AMOUNT 1117.28
	Full Name (Last, First, Middle Initial) Anne Pease Mailing Address 75 Signal Way City East Greenwich Purpose of Disbursement: Net Wages Activity or Event Identifier: Administrative FEDERAL SHARE 276.53 Full Name (Last, First, Middle Initial) Division of Taxation Mailing Address One Capitol Hill City Providence Purpose of Disbursement: State Payroll Taxes Activity or Event Identifier:	Anne Pease Mailing Address 75 Signal Way City State East Greenwich RI Purpose of Disbursement: Net Wages Activity or Event Identifier: Administrative FEDERAL SHARE + 276.53 Full Name (Last, First, Middle Initial) Division of Taxation Mailing Address One Capitol Hill City State Providence RI Purpose of Disbursement: State Payroll Taxes Activity or Event Identifier:	Full Name (Last, First, Middle Initial) Anne Pease Mailing Address 75 Signal Way City State Zip Code East Greenwich RI 02818 Purpose of Disbursement: Net Wages Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL 276.53 Full Name (Last, First, Middle Initial) Division of Taxation Mailing Address One Capitol Hill City State Zip Code Providence RI 02908 Purpose of Disbursement: State Payroll Taxes Activity or Event Identifier:	Full Name (Last, First, Middle Initial) Anne Pease Mailing Address 75 Signal Way City State Zip Code East Greenwich RI 02818 Purpose of Disbursement: Net Wages Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE 276.53 Full Name (Last, First, Middle Initial) Division of Taxation Mailing Address One Capitol Hill City State Zip Code RI 02908 Purpose of Disbursement: State Payroll Taxes Activity or Event Identifier: Administrative Category/ Type Transaction ID: H4.23539 Division of Taxation Mailing Address One Capitol Hill City State Zip Code RI 02908 Purpose of Disbursement: State Payroll Taxes Activity or Event Identifier: Administrative Category/