

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Cicilline Committee

ADDRESS (number and street)

236 Hope Street

Check if different than previously reported. (ACC)

Providence

RI

02906

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00476564

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

RI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2014

through

M M / D D / Y Y Y Y
06 / 30 / 2014

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 Nancy Benoit

Signature of Treasurer Nancy Benoit

[Electronically Filed]

Date

M M / D D / Y Y Y Y
12 / 11 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Cicilline Committee

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	120670.50	1109882.63
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	119670.50	1108132.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	77604.22	542333.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4270.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	77604.22	538063.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	526704.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Cicilline Committee

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	84650.00	793461.50
(ii) Unitemized.....	4020.50	34564.53
(iii) TOTAL of contributions from individuals ▶	88670.50	828126.03
(b) Political Party Committees.....	0.00	6.60
(c) Other Political Committees (such as PACs).....	32000.00	281750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	120670.50	1109882.63
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	4270.35
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	14.45
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	120670.50	1114167.43

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	77604.22	542333.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	12500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	70000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	70000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1750.00
21. OTHER DISBURSEMENTS	1200.00	2600.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	79804.22	629183.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	485837.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	120670.50
25. SUBTOTAL (add Line 23 and Line 24).....	606508.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	79804.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	526704.08

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Matthew A. Lopes Jr.

Mailing Address **Pannone Lopes Devereaux & West**
317 Iron Horse Way, Suite 301

City **Providence** State **RI** Zip Code **02908-5637**

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

Name of Employer **Pannone Lopes Devereaux & West LLC** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : C9063950

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Charles S. Fradin

Mailing Address **27 Dryden Ln**

City **Providence** State **RI** Zip Code **02904**

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

Name of Employer **Rhode Island Distributing** Occupation **Liquor Distributor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9112410

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Marc D Silverstein

Mailing Address **PO Box 544**

City **Mashpee** State **MA** Zip Code **02649-0544**

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

Name of Employer **retired** Occupation **physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : C9064490

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Weiss

Mailing Address 8 Whitney Dr

City Lincoln State RI Zip Code 02865-4640

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

Name of Employer Clean Energy Venture Group Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064500

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Patrick Kennedy

Mailing Address 2001 Bayshore Avenue

City Brigantine State NJ Zip Code 08203

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

Name of Employer Next Chapter LLC Occupation public speaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9102210

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Maryellen Butke

Mailing Address 24 Firglade Ave

City Providence State RI Zip Code 02906-2624

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

Name of Employer Namaste Consulting Occupation Philanthropic Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C9094370

Amount of Each Receipt this Period
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Shivan S. Subramaniam

Mailing Address 155 Grotto Ave

City Providence State RI Zip Code 02906-5720

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

Name of Employer FM Global Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : C9092290

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Joseph R. Esposito Jr.

Mailing Address 225 Dupont Dr

City Providence State RI Zip Code 02907-3112

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

Name of Employer Esposito Jewelry Occupation Owner/Jewler

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087100

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Nelson Cunningham

Mailing Address 3417 P St NW

City Washington State DC Zip Code 20007-2706

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

Name of Employer McLarty Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : C9098260

Amount of Each Receipt this Period
500.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Carlos Hatch

Mailing Address 20 Pine St
Apt 1902

City New York State NY Zip Code 10005-1422

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

Name of Employer **Fiesta** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : C9071770

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michael Prescott

Mailing Address 322 Sleepy Hollow Farm Rd

City Warwick State RI Zip Code 02886-0409

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

Name of Employer **GTECH** Occupation **General Counsel**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9103980

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mary June Ciresi

Mailing Address 4 Smithfield Road
Unit 17

City North Providence State RI Zip Code 02940

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : C9045540

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Ann-Marie Harrington

Mailing Address 26 Dianne Ave

City Portsmouth State RI Zip Code 02871-3309

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

Name of Employer Embolden Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 31 / 2014

Transaction ID : C9067430

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mike Manatos

Mailing Address 8532 W Howell Road

City Bethesda State MD Zip Code 20817-6827

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

Name of Employer Manatos & Manatos Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : C9095090

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert J. McConnell

Mailing Address 25 Weymouth St

City Providence State RI Zip Code 02906-2319

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

Name of Employer Motley Rice LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014

Transaction ID : C9057620

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Sabra Cicilline

Mailing Address 18 Nelson St

City Providence State RI Zip Code 02908-3403

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

Name of Employer none Occupation not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057630

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Francis X. McMahon

Mailing Address 1 Shady Ln

City Barrington State RI Zip Code 02806-4823

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

Name of Employer Trion Communications Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057640

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Deborah Brayton

Mailing Address 127 Tenth street

City Providence State RI Zip Code 02906

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

Name of Employer OHY Foundation Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C9100580

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Andrew Lefebvre

Mailing Address 302 Pearl St Unit 310

City Providence State RI Zip Code 02907-2278

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

Name of Employer Lefebvre Insurance Agency, Inc. Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100810

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Brian Farley

Mailing Address 712 Riviera Isle

City Fort Lauderdale State RI Zip Code 02657

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

Name of Employer PrimeLending Occupation Mortgage Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101120

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John J. Partridge Esq.

Mailing Address 9 John St

City Providence State RI Zip Code 02906-1007

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

Name of Employer Partridge Snow & Hahn Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 09 / 2014

Transaction ID : C9083690

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
John C. Manni Esq.

Mailing Address 40 Country View Dr

City Cranston State RI Zip Code 02921-2813

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

Name of Employer Law Office of John C. Manni Occupation Self-employed/Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C9063951

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alan Leifer

Mailing Address 80 Clements Rd

City Newton State MA Zip Code 02458-2618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064491

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
James P Rosenfield

Mailing Address 16 Parker St

City Lexington State MA Zip Code 02421-4907

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

Name of Employer Cambridge Energy Research Association Occupation Co-Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064501

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Michael Vocino Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 39 Carriage Ln		Transaction ID : C9064981
City Kingston	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer University of Rhode Island	Occupation Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Gerald T. Harrington Esq.		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 209 Blackberry Hill Dr		Transaction ID : C9521381
City South Kingstown	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Capitol City Group	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4700.00	

Full Name (Last, First, Middle Initial) C. Kristi M. Agniel		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 76 Humboldt Ave		Transaction ID : C9100581
City Providence	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Agniel Commodities,LLC	Occupation human resources admin	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1550.00	

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Jefferson Guimond

Mailing Address 4 Stanhope drive

City State Zip Code
Barrington RI 02806

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

Name of Employer Occupation
Patrick lynch group Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100961

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Shivan S. Subramaniam

Mailing Address 155 Grotto Ave

City State Zip Code
Providence RI 02906-5720

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

Name of Employer Occupation
FM Global Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : C9092291

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Howard R. Croll Esq.

Mailing Address 34 Hamlet Ave

City State Zip Code
Woonsocket RI 02895-4460

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

Name of Employer Occupation
Fontaine & Croll, LTD Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087101

Amount of Each Receipt this Period
1000.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Randy Olen Esq.

Mailing Address 60 Fales Ave

City State Zip Code
Barrington RI 02806-4768

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

Name of Employer self Occupation attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057641

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Anne B Miller

Mailing Address 2 Pratt St

City State Zip Code
Providence RI 02906

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C9094371

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Diana L. Johnson

Mailing Address 102 Williams St

City State Zip Code
Providence RI 02906-1031

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

Name of Employer self-employed Occupation art consultant and trustee

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : C9067881

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Francis A. Gasshcn

Mailing Address 180 Little Pond County Road

City Cumberland State RI Zip Code 02864-2824

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

Name of Employer State of Rhode Island Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2014

Transaction ID : C9087371

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
John F. Cicilline Esquire

Mailing Address 18 Nelson Street

City Providence State RI Zip Code 02908-3403

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

Name of Employer Cicilline Law Offices Occupation Attorney/Self-employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057631

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
Lawrence Eichler

Mailing Address 50 Benefit Street

City Providence State RI Zip Code 02904-2702

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

Name of Employer na Occupation na

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : C9100591

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) Brooke Lee		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014
Mailing Address 271 Angell Street		Transaction ID : C9100651
City Providence	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Eugene Lee Inc.	Occupation design assistant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) Paul A. McConnell		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 42 Larkin Pond Road, N.		Transaction ID : C9101061
City West Kingston	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Financial Innovations	Occupation ADMINISTRATOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) Marie J. Langlois		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 254 Wayland Ave Apt 1		Transaction ID : C9101111
City Providence	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Christopher P. Vitale

Mailing Address 10 Acacia Road

City Bristol State RI Zip Code 02809-1367

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

Name of Employer Capitol City Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101401

Amount of Each Receipt this Period
2000.00

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

Mailing Address 5 Eastnor Ct

City Newport State RI Zip Code 02840-3877

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

Name of Employer Prentiss Law Firm Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : C9063952

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Vincent Pisaturo

Mailing Address 14 Fox Drive

City Narragansett State RI Zip Code 02882-4841

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

Name of Employer Retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101542

Amount of Each Receipt this Period
100.00

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Marcia Leifer

Mailing Address 86 Clements Rd

City State Zip Code
Newton MA 02458

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064492

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Douglas A Cutler

Mailing Address 130 Elm St

City State Zip Code
Worcester MA 01609-1903

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

Name of Employer Occupation
Cutler Management Corp. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064502

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lumina Greenway

Mailing Address 17 Camden Court

City State Zip Code
Wakefield RI 02879

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

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
842.86

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2014

Transaction ID : C9064522

Amount of Each Receipt this Period
100.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Myrth York

Mailing Address 44 Hazard Ave

City Providence State RI Zip Code 02906-3308

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

Name of Employer retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9102262

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Brian W. Heller

Mailing Address 200 Olney Street

City Providence State RI Zip Code 02906-1657

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

Name of Employer Self-employed Occupation Cinematographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100742

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Rosalie Fain

Mailing Address 355 Blackstone Blvd
Apt 203

City Providence State RI Zip Code 02906-4948

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : C9092292

Amount of Each Receipt this Period
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
David P. DiSanto

Mailing Address 80 Coolridge Ave

City Greenville, RI State RI Zip Code 02828-2606

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

Name of Employer DiSanto, Priest & Co. Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087102

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joseph R. Beretta

Mailing Address 50 Grandview Ave

City Lincoln State RI Zip Code 02865-2903

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

Name of Employer The Robinson Green Beretta Corp. Occupation Vice President/ Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : C9098382

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Kenneth R. Feinberg

Mailing Address 1455 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-1008

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

Name of Employer Feinberg Rozen, LLP Occupation Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9103922

Amount of Each Receipt this Period
500.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Greg Kubiak

Mailing Address 20 Logan Circle NW #1-3

City Washington State DC Zip Code 20005-3744

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

Name of Employer SURA Occupation Chief Public Affairs Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : C9093822

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 1250.00

B. Full Name (Last, First, Middle Initial)
Merle Goldstein

Mailing Address 70 Harwich Rd

City Providence State RI Zip Code 02906-4918

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : C9062032

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 3000.00

C. Full Name (Last, First, Middle Initial)
Susan Leach DeBlasio Esq.

Mailing Address 70 Intervale Rd

City Providence State RI Zip Code 02906-4842

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

Name of Employer Adler Pollock & Sheehan P.C. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014

Transaction ID : C9057622

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Stephen E. Cicilline Esq.

Mailing Address 7 Fair Oaks Ln

City Greenville State RI Zip Code 02828-2525

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

Name of Employer Stephen E. Cicilline, Esquire Occupation Self-employed/Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057632

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dennis J. Roberts II

Mailing Address 349 Hope St

City Providence State RI Zip Code 02906-4652

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

Name of Employer Law Offices of Dennis J. Roberts II Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057642

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Daniel G. Siegel

Mailing Address 20 Humboldt Ave

City Providence State RI Zip Code 02906-4107

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

Name of Employer M&S Rare Books, Incorporated Occupation Bookseller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C9100582

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
V. Duncan Johnson

Mailing Address 102 Williams Street

City Providence State RI Zip Code 02906

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

Name of Employer Edwards Wildman Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : C9100592

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Eugene Lee

Mailing Address 271 Angell Street

City Providence State RI Zip Code 02906-2101

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

Name of Employer Eugene Lee Inc. Occupation set designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2014

Transaction ID : C9100652

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ronald Mueller

Mailing Address 1916 16th Street NW

City Washington State DC Zip Code 20009-3308

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

Name of Employer Gibson Dunn & Crutcher LLP Occupation attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100852

Amount of Each Receipt this Period
 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Howard Menaker

Mailing Address 1401 Church Street, NW
#503

City Washington State DC Zip Code 20005-2056

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101402

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Allan M. Shine Esq.

Mailing Address 188 Pardon Joslin Rd

City Exeter State RI Zip Code 02822-2709

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

Name of Employer ChaceRuttenbergFreedmanLlp Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : C9063953

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
George A Violin

Mailing Address 16 Main St

City Dover State MA Zip Code 02030-2024

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

Name of Employer Medical Eye Care Associates Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064493

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Edward Harvey

Mailing Address 527 College Avenue

City Haverford State PA Zip Code 19041

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2014

Transaction ID : C9064523

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Steven M Champlin

Mailing Address 4800 Dexter St NW

City Washington State DC Zip Code 20007-1017

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

Name of Employer The Duberstein Group Occupation Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087103

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Bruna P. Boyle

Mailing Address 314 Greenwood Ave

City Warwick State RI Zip Code 02886-2028

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 05 / 2014

Transaction ID : C8835323

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 27 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
David Hirsch

Mailing Address 123 Pratt St

City Providence State RI Zip Code 02906-1412

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

Name of Employer Pawtucket Fasteners Occupation Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : C9098383

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Paul Sagan

Mailing Address 4 Lowell St.

City Cambridge State MA Zip Code 02138

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

Name of Employer Akamai Technologies Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8894623

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
John E. MacDonald Esq.

Mailing Address 81 Clark Rd

City Smithfield State RI Zip Code 02917-2331

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : C9062033

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Deb Norman

Mailing Address 292 Morris Ave

City Providence State RI Zip Code 02906-2611

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

Name of Employer Rue De L'Espoir Restaurant Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2014

Transaction ID : C9067433

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Michael J. Colucci Esq.

Mailing Address 176 Little Pond County Rd

City Cumberland State RI Zip Code 02864-2824

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

Name of Employer Olenn & Penza Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : C9057623

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joyce A. Faraone Esq.

Mailing Address 15 Windrose Cir

City Exeter State RI Zip Code 02822-3617

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

Name of Employer Faraone Law Offices Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057633

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
George L. Santopietro

Mailing Address 5 Erica Dr

City Lincoln State RI Zip Code 02865-4545

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

Name of Employer Coia & Lepora, LTD Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057643

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kenneth Orenstein

Mailing Address 330 Lloyd Ave.

City Providence State RI Zip Code 02906-4212

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

Name of Employer Orenstein Real Estate Service Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C9100583

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Peter Leon

Mailing Address 2006 Columbia Rd NW #7

City Washington State DC Zip Code 20009-1345

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

Name of Employer Dow Lohnes Gov't Strategies Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100763

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Andrew Horwitz

Mailing Address 199 Raleigh Avenue

City Pawtucket State RI Zip Code 02860-6136

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

Name of Employer Roger Williams University School of La Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : C9052613

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lawrence Siff

Mailing Address 75 Second Avenue Suite 605

City Needham State MA Zip Code 02494

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

Name of Employer Neptune Advisors LLC Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101163

Amount of Each Receipt this Period
250.00

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

Mailing Address 4 Richmond Square

City providence State RI Zip Code 02906

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

Name of Employer aloha partners Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101424

Amount of Each Receipt this Period
2600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Bonnie Penzias

Mailing Address 108 Arnold Rd

City State Zip Code
Newton Center MA 02459

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : C9064494

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LINDA KUSHNER

Mailing Address 560 Lloyd Ave

City State Zip Code
Providence RI 29065

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : C9055334

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Thomas McConnell

Mailing Address 5 Strong Pl

City State Zip Code
Brooklyn NY 11231-3708

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

Name of Employer Occupation
Cushman & Wakefield Hotel Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9104914

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) John N. Calvino		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 373 Elmwood Ave		Transaction ID : C9067604
City Providence	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Calvino Law Office	Occupation Self-employed/Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Judith Crowell		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 85 Bridge St		Transaction ID : C9057624
City Newport	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Roberta B. Feather		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 70 Elmgrove Ave		Transaction ID : C9100584
City Providence	State RI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer University of Rhode Island	Occupation Adult Psychiatric Services	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 33 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Christopher Scott Fay

Mailing Address 939 T Street, NW

City Washington State DC Zip Code 20001

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

Name of Employer Sheridan Group Occupation Director - Policy & Advocacy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9100764

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Julie S. Smith

Mailing Address 34 Webster St

City Newport State RI Zip Code 02840-4031

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

Name of Employer Self-Employed Occupation artist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101134

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Barbara Roberts

Mailing Address 28 Marcello Dr.

City Jamestown State RI Zip Code 02835

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

Name of Employer Lifespan Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101455

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Robert V. Chisholm Esq.

Mailing Address 175 Arlington Ave

City Providence State RI Zip Code 02906-2339

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

Name of Employer Chisholm Chisholm & Kirkpatrick LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C9063945

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Miriam Weizenbaum Esq.

Mailing Address 65 Weymouth St

City Providence State RI Zip Code 02906-2335

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

Name of Employer DeLuca & Weizenbaum Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : C9026665

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Simeon Bruner

Mailing Address 165 Brattle Street

City Cambridge State MA Zip Code 02138

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

Name of Employer Bruner/Cott & Assoc. Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9102215

Amount of Each Receipt this Period
2600.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Winnie Stachelberg

Mailing Address 2910 44th Place NW

City Washington State DC Zip Code 20016-3555

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

Name of Employer Center for American Progress Occupation EVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9102265

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mary E. Indeglia

Mailing Address PO Box 568

City Narragansett State RI Zip Code 02882-0568

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

Name of Employer Massachusetts General Hospital Occupation Nurse Practitioner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9102285

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Lise Iwon

Mailing Address 11 Caswell St

City Wakefield State RI Zip Code 02878

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

Name of Employer Self Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 05 / 2014

Transaction ID : C8835345

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Nancy Ponte

Mailing Address 81 Pelham Street

City State Zip Code
Newport RI 02840

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

Name of Employer Occupation
Rhode Island Legal Services Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9056675

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Charles Hindmarsh

Mailing Address 213 Hendricks Isle

City State Zip Code
Fort Lauderdale FL 33301-3706

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : C8894995

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
David V. Iglizzo Esq.

Mailing Address 926 Park Ave

City State Zip Code
Cranston RI 02910-2708

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

Name of Employer Occupation
Darrow Everett LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : C9067195

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 37 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Felix A. Porcaro

Mailing Address 2 Coulter Dr

City State Zip Code
Jamestown RI 02835-1614

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

Name of Employer Occupation
Crimsonrose Accessories Importer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : C9067605

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Leon C. Boghossian III

Mailing Address 10 Robbins Dr

City State Zip Code
Barrington RI 02806-2612

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

Name of Employer Occupation
Hinckley, Allen & Snyder LLP Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 21 / 2014

Transaction ID : C9057625

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Brian A. Goldman Esq.

Mailing Address 681 Smith St

City State Zip Code
Providence RI 02908-3502

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

Name of Employer Occupation
Goldman Law Offices Self-employed/Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057635

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Wallace B. Gernt Jr.

Mailing Address 14 Wingate Rd

City Providence State RI Zip Code 02906-4910

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

Name of Employer The Bradford Group Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C9100585

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jack Gobis

Mailing Address 54 Prospect Hill Street

City Newport State RI Zip Code 02840

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

Name of Employer Gobis &Co. LLC Occupation Management Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100715

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Deb Norman

Mailing Address 292 Morris Ave

City Providence State RI Zip Code 02906-2611

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

Name of Employer Rue De L'Espoir Restaurant Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100835

Amount of Each Receipt this Period
100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Patrick C. Lynch

Mailing Address 11 Briarfield Rd

City State Zip Code
Barrington RI 02806-5042

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

Name of Employer Occupation
Patrick Lynch Group Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101426

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Miriam Weizenbaum Esq.

Mailing Address 65 Weymouth St

City State Zip Code
Providence RI 02906-2335

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

Name of Employer Occupation
DeLuca & Weizenbaum Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : C9026666

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Ann B Pava

Mailing Address 36 Colony Rd

City State Zip Code
West Hartford CT 06117-2214

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064496

Amount of Each Receipt this Period
1000.00

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

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

1900.00

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

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

FOR LINE NUMBER: PAGE 40 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
William S. Friedman

Mailing Address 320 Central Park West
Apt 18B

City State Zip Code
New YORK NY 10025-7659

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

Name of Employer Occupation
Beachwold Residential LLC Real estate management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 30 2014

Transaction ID : C9102206

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joyce Newstat

Mailing Address 1200 California Street

City State Zip Code
San Francisco CA 94109-0004

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

Name of Employer Occupation
self Policy Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 30 2014

Transaction ID : C9102286

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Francis A. Gasshcn

Mailing Address 180 Little Pond County Road

City State Zip Code
Cumberland RI 02864-2824

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

Name of Employer Occupation
State of Rhode Island Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 15 2014

Transaction ID : C9054946

Amount of Each Receipt this Period
100.00

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 41 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Mark S. Mandell Esq.
 Mailing Address 414 Love Ln
 City State Zip Code
 East Greenwich RI 02818-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mandell, Schwartz & Boisclair Attorney
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 30 2014
Transaction ID : C9067196
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Robert A. Dillon Jr.
 Mailing Address 59 Sowams Rd
 City State Zip Code
 Barrington RI 02806-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Eagle Creek Software Services Vice President and Director
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 30 2014
Transaction ID : C9105266
 Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lumina Greenway
 Mailing Address 17 Camden Court
 City State Zip Code
 Wakefield RI 02879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 28 2014
Transaction ID : C9100446
 Amount of Each Receipt this Period
 100.00

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
James P. Howe Esq.

Mailing Address 45 Bedford Ln

City North Kingstown State RI Zip Code 02852-7008

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057636

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Richard A. Wilson

Mailing Address 2420 14th St, NW
Apt 314

City Washington State DC Zip Code 20009

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

Name of Employer National Lesbian & Gay Law Association Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9100766

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Lumina Greenway

Mailing Address 17 Camden Court

City Wakefield State RI Zip Code 02879

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **842.86**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : C8907566

Amount of Each Receipt this Period
100.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 43 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Max Brickle

Mailing Address 215 forge road

City North Kingstown State RI Zip Code 02852-1009

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

Name of Employer H.Brickle and Son Inc. Occupation Company President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101106

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
Leonard L. Lopes

Mailing Address 28 Bayley St
Apt 501

City Pawtucket State RI Zip Code 02860-2986

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

Name of Employer Pannone Lopes Devereaux & West Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101427

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
Gail A. Mcgowan

Mailing Address 45 Whitaker Ave

City Rumford State RI Zip Code 02916-3224

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

Name of Employer City of Providence Occupation Compliance Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 544.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9101437

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Deb Norman

Mailing Address 292 Morris Ave

City Providence State RI Zip Code 02906-2611

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

Name of Employer Rue De L'Espoir Restaurant Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8908297

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Malcolm Farmer III

Mailing Address 190 Upton Avenue

City Providence State RI Zip Code 02906-5748

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

Name of Employer Hinckley,Allen & Snyder LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : C9063947

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Edward Hamilton

Mailing Address 26384 Carmel Rancho Lane Suite 202

City Carmel State CA Zip Code 93922

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

Name of Employer HR&A, Inc. Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101547

Amount of Each Receipt this Period
1000.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 45 OF 93
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Eleanor L. Lewis

Mailing Address 165 Blackstone Blvd.

City Providence State RI Zip Code 02906-5701

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

Name of Employer NA Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9102207

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Chrys lemon

Mailing Address 1155 15th St NW
Ste 1101

City Washington State DC Zip Code 20005-2739

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

Name of Employer McIntyre & Lemon, PLLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9103947

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Richard M. McAuliffe Jr.

Mailing Address 80 Fox Run

City East Greenwich State RI Zip Code 02818-1645

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

Name of Employer The Mayforth Group Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : C9093827

Amount of Each Receipt this Period
1000.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Marc B. Gursky Esq.

Mailing Address 240 Indian Trl

City: Saunderstown State: RI Zip Code: 02874-2482

FEC ID number of contributing federal political committee: C

Name of Employer: Gursky Law Associates Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 30 / 2014

Transaction ID : C9067197

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Edward Harvey

Mailing Address 527 College Avenue

City: Haverford State: PA Zip Code: 19041

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 06 / 28 / 2014

Transaction ID : C9100447

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
KENNETH L. RICHARDSON Jr.

Mailing Address 3952 POST ROAD

City: warwick State: RI Zip Code: 02886-9235

FEC ID number of contributing federal political committee: C

Name of Employer: KENNETH L RICHARDSON JR CPA, INC Occupation: CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 15 / 2014

Transaction ID : C9087367

Amount of Each Receipt this Period: 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Barbara Hurst Esq.

Mailing Address 6 Ruthven St

City Providence State RI Zip Code 02906-4817

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

Name of Employer State of Rhode Island, Public Defender Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C9057637

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kenneth R. Dulgarian

Mailing Address 336 Olney St

City Providence State RI Zip Code 02906-2318

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

Name of Employer Ken Dulgarian Real Estate Occupation Self-employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : C9100587

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Edward Harvey

Mailing Address 527 College Avenue

City Haverford State PA Zip Code 19041

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : C8907567

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Jonathan Spencer

Mailing Address 1021 N Garfield St
Apt 410

City State Zip Code
Arlington VA 22201-2548

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9100817

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gerald T. Harrington Esq.

Mailing Address 209 Blackberry Hill Dr

City State Zip Code
South Kingstown RI 02879-6555

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

Name of Employer Occupation
Capitol City Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4700.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101078

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Michelle Izzo

Mailing Address P.O. Box 6426

City State Zip Code
Providence RI 02940

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : C9063948

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Stonberg

Mailing Address 31 Brook Street

City Wellesley State MA Zip Code 02482-6617

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

Name of Employer self Occupation real estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9064498

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
James V. DeRentis

Mailing Address 37 George St

City Providence State RI Zip Code 02906-1217

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

Name of Employer Residential Properties LTD Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C9100588

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Merle Goldstein

Mailing Address 70 Harwich Rd

City Providence State RI Zip Code 02906-4918

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087098

Amount of Each Receipt this Period
 600.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Ronald F. Cascione

Mailing Address 6 Highland Terrace

City State Zip Code
Smithfield RI 02917-1011

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

Name of Employer Occupation
Brennan,Recupero,Cascione,Scungio&McAI Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : C9045818

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
asifa zuberi

Mailing Address 10166 Rush Street

City State Zip Code
El Monte CA 91733

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

Name of Employer Occupation
New York State retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : C8901988

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Victor J. Beretta

Mailing Address 151 Table Rock Rd

City State Zip Code
Wakefield RI 02879-1826

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057628

Amount of Each Receipt this Period
500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Patrick T. Jones Esq.

Mailing Address **Cooley Manion Jones LLP**
21 Custom House St.

City **Boston** State **MA** Zip Code **02110-3507**

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

Name of Employer **Cooley Manion Jones LLP** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057638

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Barry R. Sloane

Mailing Address **45 Stonecrest Drive**

City **Needham** State **MA** Zip Code **02492-2785**

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

Name of Employer **Century Bank** Occupation **banker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101398

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Michael S. Lorber

Mailing Address **400 E 51st St**

City **New York** State **NY** Zip Code **10022-8011**

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

Name of Employer **Douglas Elliman Real Estate** Occupation **Real estate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101408

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Scott Kilpatrick

Mailing Address 50 Barnes St

City Providence State RI Zip Code 02906-1502

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

Name of Employer Chisholm, Chisholm & Kilpatrick Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 04 / 2014

Transaction ID : C9063949

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Merle Goldstein

Mailing Address 70 Harwich Rd

City Providence State RI Zip Code 02906-4918

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : C9087099

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Carlos Hatch

Mailing Address 20 Pine St Apt 1902

City New York State NY Zip Code 10005-1422

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

Name of Employer Fiesta Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C9028209

Amount of Each Receipt this Period
250.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Carlos Hatch

Mailing Address 20 Pine St
Apt 1902

City New York State NY Zip Code 10005-1422

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

Name of Employer **Fiesta** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 05 / 2014

Transaction ID : C8835309

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Therese M. Caron

Mailing Address 4 Paterson St

City Providence State RI Zip Code 02906-5502

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

Name of Employer **Therese M. Caron, Esq.** Occupation **Self-employed/Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057629

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
James Lepore Esq.

Mailing Address 201 John Mowry Rd

City Smithfield State RI Zip Code 02917-1230

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

Name of Employer **Coia & Lepore LTD** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C9057639

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
R. Kelly Sheridan

Mailing Address 253 Freeman Pkwy

City Providence State RI Zip Code 02906-5740

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

Name of Employer: Roberts Carroll Feldstein & Peirce
Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 27 / 2014

Transaction ID : C9100579

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
DONNA FISHMAN

Mailing Address 5420 NORTH OCEAN DR.
2206

City SINGER ISLAND State FL Zip Code 33404-2527

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

Name of Employer: RI RETIRED TEACHERS
Occupation: TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 30 / 2014

Transaction ID : C9100739

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Constance Worthington

Mailing Address 240 Cole Avenue

City Providence State RI Zip Code 02906-3465

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

Name of Employer: retired
Occupation: former nonprofit executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 550.00

Date of Receipt: 06 / 30 / 2014

Transaction ID : C9100909

Amount of Each Receipt this Period: 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Carlos Hatch

Mailing Address 20 Pine St
Apt 1902

City New York State NY Zip Code 10005-1422

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

Name of Employer **Fiesta** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9111769

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Julie S. Smith

Mailing Address 34 Webster St

City Newport State RI Zip Code 02840-4031

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

Name of Employer **Self-Employed** Occupation **artist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101139

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Beverly Walters

Mailing Address 48 N Court St
Apt 3

City Providence State RI Zip Code 02903-1217

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

Name of Employer **Self** Occupation **Doctor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9101179

Amount of Each Receipt this Period
1000.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Louis Honig

Mailing Address 130 Great Circle Dr

City Mill Valley State CA Zip Code 94941

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

Name of Employer CORE Occupation Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : C9026667A

Amount of Each Receipt this Period
 500.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : C9026667AB

Amount of Each Receipt this Period
 500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

84650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION

Mailing Address 777 6th St NW
Ste 200

City Washington State DC Zip Code 20001-3707

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9102320

Amount of Each Receipt this Period
4000.00

B. Full Name (Last, First, Middle Initial)
ATU Cope Special Holding

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

FEC ID number of contributing federal political committee. **C C00032995**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : C9039070

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Build PAC National Association of Home Builders

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : C9067880

Amount of Each Receipt this Period
1000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 58 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
Google NETPAC

Mailing Address 1101 New York Ave NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9109731

Amount of Each Receipt this Period
 _____ 2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

Mailing Address 220 Leigh Farm Rd
Palladian 1

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : C8901432

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave NW
Suite 500 West

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2014

Transaction ID : C9094373

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2014

Transaction ID : C8901433

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
COMMUNICATION WORKERS OF AMERICA

Mailing Address 501 THIRD STREET NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70000211

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C9112414

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POL

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C9063954

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave NW
Suite 500 West

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : C9094374

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T)

Mailing Address 208 S Akard St
Ste 3521

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 09 / 2014

Transaction ID : C9083694

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Council of Insurance Agents & Brokers PAC

Mailing Address 701 Pennsylvania Ave NW
Ste 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C9112415

Amount of Each Receipt this Period
1500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND

Mailing Address 1370 ONTARIO ST

City	State	Zip Code
CLEVELAND	OH	44113

FEC ID number of contributing federal political committee. **C C00099234**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

Transaction ID : C9103436

Amount of Each Receipt this Period
 _____ 5000.00

B. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd
Ste 1500

City	State	Zip Code
Arlington	VA	22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3500.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	15	/	2014

Transaction ID : C9057627

Amount of Each Receipt this Period
 _____ 1500.00

C. Full Name (Last, First, Middle Initial)
National Association of Broadcasters

Mailing Address 1771 N St NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

Transaction ID : C9111219

Amount of Each Receipt this Period
 _____ 1000.00

SUBTOTAL of Receipts This Page (optional).....	_____ 7500.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 62 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Full Name (Last, First, Middle Initial)
American Federation of Teachers

Mailing Address 555 NEW JERSEY AVENUE, NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 30 2014

Transaction ID : C9353809

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

32000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.40 Transaction ID : D457200
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jewish Voice & Herald		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 401 Elmgrove Ave		Amount of Each Disbursement this Period 399.00 Transaction ID : D459670
City Providence	State RI	
Zip Code 02906	Purpose of Disbursement Print Buys	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 45.70 Transaction ID : D459680
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	445.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 93			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Options		M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address PO Box 6406		Amount of Each Disbursement this Period
City Providence	State RI	Zip Code 02940-6406
Purpose of Disbursement Print Buys	Category/Type	
Candidate Name	Transaction ID : D459671	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Democratic Congressional Campaign Cmte		M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Fundraising Services	Category/Type	
Candidate Name	Transaction ID : D459641	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. First Bank Merchant Services		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : D459681	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10945.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Laura Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 10 Sumter St		Amount of Each Disbursement this Period 250.00 Transaction ID : D459691
City Providence	State RI	
Zip Code 02907	Purpose of Disbursement Events (Field)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Roberta Cicilline-DiMezza		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 119 High Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D459701
City Bristol	State RI	
Zip Code 02809	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 100 Hartford Ave		Amount of Each Disbursement this Period 294.00 Transaction ID : D459722
City Providence	State RI	
Zip Code 02909-3323	Purpose of Disbursement Postage (Fundraising)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	844.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial)
A. Institute for Labor Studies and Research - Scholarship Fund

Mailing Address 99 Bald Hill Road

City Cranston State RI Zip Code 02920

Purpose of Disbursement Print Buys

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 05 / 12 / 2014

Amount of Each Disbursement this Period 175.00

Transaction ID : D459672

Full Name (Last, First, Middle Initial)
B. First Bank Merchant Services

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 03 / 2014

Amount of Each Disbursement this Period 114.01

Transaction ID : D459682

Full Name (Last, First, Middle Initial)
C. NGP VAN, Inc.

Mailing Address 1101 15th St, NW Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement Database

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 04 / 25 / 2014

Amount of Each Disbursement this Period 3450.00

Transaction ID : D459692

SUBTOTAL of Disbursements This Page (optional)..... 3739.01

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Roberta Cicilline-DiMezza		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 119 High Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D459702
City Bristol	State RI	
Zip Code 02809	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NAACP-Providence Branch		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address P.O Box 5767		Amount of Each Disbursement this Period 350.00 Transaction ID : D459712
City Providence	State RI	
Zip Code 02903	Purpose of Disbursement Print Buys	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 1101 15th St, NW Suite 500		Amount of Each Disbursement this Period 3450.00 Transaction ID : D459693
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Database	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 19.80 Transaction ID : D459683
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Roberta Cicilline-DiMezza		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 119 High Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D459703
City Bristol State RI Zip Code 02809	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 236 Meeting Street		Amount of Each Disbursement this Period 90.94 Transaction ID : D459723
City Providence State RI Zip Code 02906	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	410.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.40 Transaction ID : D457864
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. WNRI		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 786 Diamond Hill Rd		Amount of Each Disbursement this Period 199.00 Transaction ID : D459674
City Woonsocket	State RI	
Zip Code 02895	Purpose of Disbursement Radio Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 501 Wampanoag Trail		Amount of Each Disbursement this Period 49.00 Transaction ID : D459684
City Riverside	State RI	
Zip Code 02915	Purpose of Disbursement Payroll Tax	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	248.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Blaze		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 776 Hope Street		Amount of Each Disbursement this Period 359.20
City Providence	State RI	
Zip Code 02906	Purpose of Disbursement Catering (Fundraising)	Transaction ID : D459694
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sal's Bakery		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1288 Chalkstone Ave		Amount of Each Disbursement this Period 390.00
City Providence	State RI	
Zip Code 02908	Purpose of Disbursement Catering (Fundraising)	Transaction ID : D459724
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.99
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D459994
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	750.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 11.97
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D453185
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Digital Turf		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 27 Clear Brook Xing		Amount of Each Disbursement this Period 750.00
City Kennebunk	State ME	
Zip Code 04043-6303	Purpose of Disbursement Web Expenses	Transaction ID : D459665
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 838.69
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D459675
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1600.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trail

City Riverside State RI Zip Code 02915

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 55.50

Transaction ID : D459685

B. Rolla Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1132 6th Street, NW #2

City Washington State DC Zip Code 20001-1639

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 16007.96

Transaction ID : D459666

C. First Bank Merchant Services

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2014

Amount of Each Disbursement this Period: 511.56

Transaction ID : D459676

SUBTOTAL of Disbursements This Page (optional) 16575.02

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Paychex

Full Name (Last, First, Middle Initial)
Mailing Address 501 Wampanoag Trail

City Riverside State RI Zip Code 02915

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 49.00

Transaction ID : D459686

B. Centro Dining Room

Full Name (Last, First, Middle Initial)
Mailing Address 1 W Exchange St

City Providence State RI Zip Code 02903

Purpose of Disbursement Catering (Fundraising)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 11 / 2014

Amount of Each Disbursement this Period: 319.11

Transaction ID : D459706

C. ActBlue

Full Name (Last, First, Middle Initial)
Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138-5106

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 25 / 2014

Amount of Each Disbursement this Period: 19.75

Transaction ID : D454786

SUBTOTAL of Disbursements This Page (optional) 387.86

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Democratic Congressional Campaign Cmte

Full Name (Last, First, Middle Initial)

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Fundraising Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 06 / 19 / 2014

Amount of Each Disbursement this Period: 10000.00

Transaction ID : D459617

B. Rolla Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1132 6th Street, NW #2

City Washington State DC Zip Code 20001-1639

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 04 / 2014

Amount of Each Disbursement this Period: 1904.16

Transaction ID : D459667

C. First Bank Merchant Services

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2014

Amount of Each Disbursement this Period: 26.30

Transaction ID : D459677

SUBTOTAL of Disbursements This Page (optional) 11930.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. David Cicilline		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address P.O Box 9107		Amount of Each Disbursement this Period 1162.19 Transaction ID : D459707
City Providence	State RI	
Zip Code 02908	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 3.95 Transaction ID : D454787
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 1173.15 Transaction ID : D459678
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2339.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial)
A. Hostway.com

Mailing Address 100 N Riverside Plz
Ste 800

City Chicago State IL Zip Code 60606-1564

Purpose of Disbursement Web Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 11 / 2014

Amount of Each Disbursement this Period: 36.95

Transaction ID : D459668

Full Name (Last, First, Middle Initial)
B. CFO Compliance

Mailing Address One Park Row, 5th Floor

City Providence State RI Zip Code 02903

Purpose of Disbursement Compliance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 3010.29

Transaction ID : D459698

Full Name (Last, First, Middle Initial)
C. Just Ellen's Inc.

Mailing Address 635 Division Road

City East Greenwich State RI Zip Code 02818

Purpose of Disbursement Catering (Fundraising)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 2313.75

Transaction ID : D459708

SUBTOTAL of Disbursements This Page (optional) 5360.99

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 754.02
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement Credit Card Processing Fee	Category/Type	Transaction ID : D459679
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. L & M Promotions		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 1300 I Street, NW		Amount of Each Disbursement this Period 5000.00
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Event Expenses (Fundraising)	Category/Type	Transaction ID : D459709
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 2965 W Corporate Lakes Blvd		Amount of Each Disbursement this Period 6028.52
City Weston	State FL Zip Code 33331-3626	
Purpose of Disbursement Credit Card Reimbursement	Category/Type	Transaction ID : D459618
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11782.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 1 Aviation Cir		Amount of Each Disbursement this Period 8.00
City Washington	State DC Zip Code 20001-6000	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D459620
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Rayburn Deli		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address US House of Representatives		Amount of Each Disbursement this Period 32.40
City Washington	State DC Zip Code 20515	
Purpose of Disbursement Food/Beverage	Candidate Name	Transaction ID : D459621
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 597 Branch Avenue		Amount of Each Disbursement this Period 67.56
City Providence	State RI Zip Code 02906	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : D459631
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. Shell Oil

Full Name (Last, First, Middle Initial)
Mailing Address 691 N Main St

City Providence State RI Zip Code 02904-5701

Purpose of Disbursement Gas

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 75.26

Transaction ID : D459622

[MEMO ITEM]

B. Hemenway's

Full Name (Last, First, Middle Initial)
Mailing Address 121 South Main Street

City Providence State RI Zip Code 02903

Purpose of Disbursement Food/Beverages

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 2251.77

Transaction ID : D459632

[MEMO ITEM]

c. FedEx Ground

Full Name (Last, First, Middle Initial)
Mailing Address 6 Green Earth Way

City Johnston State RI Zip Code 02919-5845

Purpose of Disbursement Shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 36.52

Transaction ID : D459626

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Distad's BP		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 823 Pennsylvania Ave SE		Amount of Each Disbursement this Period 55.38
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Gas	Transaction ID : D459636
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Ground		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 6 Green Earth Way		Amount of Each Disbursement this Period 77.96
City Johnston	State RI	
Zip Code 02919-5845	Purpose of Disbursement Shipping	Transaction ID : D459627
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Hemenway's		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 121 South Main Street		Amount of Each Disbursement this Period 241.27
City Providence	State RI	
Zip Code 02903	Purpose of Disbursement Food/Beverages	Transaction ID : D459637
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Mr. Sean Eldridge		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 30 Crosby St 3A		Amount of Each Disbursement this Period 1000.00
City New York	State NY	
Zip Code 10013-2792	Purpose of Disbursement Membership Fees	Transaction ID : D459619 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hostway.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 100 N Riverside Plz Ste 800		Amount of Each Disbursement this Period 36.95
City Chicago	State IL	
Zip Code 60606-1564	Purpose of Disbursement Web Expenses	Transaction ID : D459629 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2965 W Corporate Lakes Blvd		Amount of Each Disbursement this Period 2065.12
City Weston	State FL	
Zip Code 33331-3626	Purpose of Disbursement Credit Card Payment	Transaction ID : D459720
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2065.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

A. USPS

Full Name (Last, First, Middle Initial)
Mailing Address 100 Hartford Ave

City Providence State RI Zip Code 02909-3323

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2014

Amount of Each Disbursement this Period: 19.99

Transaction ID : D459920

[MEMO ITEM]

B. US Airways

Full Name (Last, First, Middle Initial)
Mailing Address 111 W Rio Salado Pkwy

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement Travel (Airfare)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2014

Amount of Each Disbursement this Period: 15.00

Transaction ID : D459910

[MEMO ITEM]

c. US Airways

Full Name (Last, First, Middle Initial)
Mailing Address 111 W Rio Salado Pkwy

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement Travel (Airfare)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2014

Amount of Each Disbursement this Period: 213.00

Transaction ID : D459911

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Bistro Bis Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 15 E Street, NW		Amount of Each Disbursement this Period 114.80
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meals	Transaction ID : D459921
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. O Dinis Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 579 Warren Avenue		Amount of Each Disbursement this Period 292.00
City East Providence	State RI	
Zip Code 02914	Purpose of Disbursement Meals	Transaction ID : D459912
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 597 Branch Avenue		Amount of Each Disbursement this Period 68.50
City Providence	State RI	
Zip Code 02906	Purpose of Disbursement Gas	Transaction ID : D459922
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 691 N Main St		Amount of Each Disbursement this Period 46.92
City Providence	State RI	
Zip Code 02904-5701	Purpose of Disbursement Gas	Transaction ID : D459924
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Sheraton Hotels		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 369.55
City	State	
Zip Code	Purpose of Disbursement Travel (Hotel)	Transaction ID : D459915
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 182 Howard Street, Suite 8		Amount of Each Disbursement this Period 95.61
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Travel	Transaction ID : D459906
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Sheraton Hotels		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 2.00
City	State Zip Code	
Purpose of Disbursement Travel (Hotel)	Category/ Type	Transaction ID : D459916 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 182 Howard Street, Suite 8		Amount of Each Disbursement this Period 115.00
City	State Zip Code	
Purpose of Disbursement Travel	Category/ Type	Transaction ID : D459907 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 691 N Main St		Amount of Each Disbursement this Period 50.41
City	State Zip Code	
Purpose of Disbursement Gas	Category/ Type	Transaction ID : D459918 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 1 Aviation Cir		Amount of Each Disbursement this Period 234.00
City Washington	State DC	
Zip Code 20001-6000	Purpose of Disbursement Travel (Airfare)	Transaction ID : D459909
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2965 W Corporate Lakes Blvd		Amount of Each Disbursement this Period 2923.05
City Weston	State FL	
Zip Code 33331-3626	Purpose of Disbursement Credit Card Payment	Transaction ID : D459721
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Distad's BP		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 823 Pennsylvania Ave SE		Amount of Each Disbursement this Period 59.01
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Gas	Transaction ID : D459792
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2923.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 597 Branch Avenue		Amount of Each Disbursement this Period 70.58
City Providence	State RI	
Zip Code 02906	Purpose of Disbursement Gas	Transaction ID : D459793
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Distad's BP		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 823 Pennsylvania Ave SE		Amount of Each Disbursement this Period 58.70
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Gas	Transaction ID : D459784
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 297.00
City Chicago	State IL	
Zip Code 60666-0100	Purpose of Disbursement Travel (Airfare)	Transaction ID : D459794
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 149.00
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Travel (Airfare)	Category/Type	Transaction ID : D459795 [MEMO ITEM]
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Westin		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 404 S Figueroa St		Amount of Each Disbursement this Period 144.45
City Los Angeles	State CA Zip Code 90071	
Purpose of Disbursement Travel (Hotel)	Category/Type	Transaction ID : D459776 [MEMO ITEM]
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1 Aviation Cir		Amount of Each Disbursement this Period 446.00
City Washington	State DC Zip Code 20001-6000	
Purpose of Disbursement Travel (Airfare)	Category/Type	Transaction ID : D459786 [MEMO ITEM]
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 85.00
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Travel (Airfare)	Category/Type	Transaction ID : D459796 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1 Aviation Cir		Amount of Each Disbursement this Period 446.00
City Washington	State DC Zip Code 20001-6000	
Purpose of Disbursement Travel (Airfare)	Category/Type	Transaction ID : D459787 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 406.50
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel (Airfare)	Category/Type	Transaction ID : D459797 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 259.00
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Travel (Train)	Transaction ID : D459788
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 104.00
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Travel (Train)	Transaction ID : D459789
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	76447.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 93			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Mrs. Dawn M. Dillon		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 59 Sowams Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : D450589
City Barrington	State RI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 93			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial) A. Latino Public Radio		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1246 Cranston St		Amount of Each Disbursement this Period 300.00 Transaction ID : D459710
City Cranston State RI Zip Code 02920	Purpose of Disbursement Contributions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Reed Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address P.O Box 8628		Amount of Each Disbursement this Period 250.00 Transaction ID : D459714
City Cranston State RI Zip Code 02920	Purpose of Disbursement Contributions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Women's Health & Education Fund		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address P.O Box 5863		Amount of Each Disbursement this Period 250.00 Transaction ID : D459718
City Providence State RI Zip Code 02903	Purpose of Disbursement Contributions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 93			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cicilline Committee

Full Name (Last, First, Middle Initial)
A. Family Resource Community Action

Mailing Address 245 Main Street

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement Contributions

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2014

Amount of Each Disbursement this Period: 150.00

Transaction ID : D459669

Full Name (Last, First, Middle Initial)
B. Young Democrats of RI PAC

Mailing Address 62 Camp Street

City Providence State RI Zip Code 02906

Purpose of Disbursement Contributions

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : D459719

Full Name (Last, First, Middle Initial)
C. Newport Festivals Foundation, Inc.

Mailing Address PO Box 3865

City Newport State RI Zip Code 02840

Purpose of Disbursement Donations

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 1700.00

Transaction ID : D459638

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 400.00

TOTAL This Period (last page this line number only) 1200.00