

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Langevin for Congress

ADDRESS (number and street) 181-A Knight Street

Check if different than previously reported. (ACC)

Warwick RI 02886

2. **FEC IDENTIFICATION NUMBER** C00344697

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

RI 02

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 in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on 11 02 2010 in the State of RI

5. Covering Period 10 14 2010 through 11 22 2010

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 Edward Giroux

Signature of Treasurer Electronically Filed by Edward Giroux Date 12 02 2010

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 75

Write or Type Committee Name

Langevin for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	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)).....	76905.00	1096846.11
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	76905.00	1096046.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	208283.44	1003606.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	7898.80	70.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	200384.64	1003536.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	242395.02	
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).....	4022.34	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Langevin for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; margin: 5px;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>2</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date of general election)	M	M	1	1	D	D	0	2	Y	Y	Y	Y	2	0	1	0	COLUMN C Total for <table border="1" style="display: inline-table; margin: 5px;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>3</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; margin: 5px;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>2</td></tr></table> <table border="1" style="display: inline-table; margin: 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	3	Y	Y	Y	Y	2	0	1	0	M	M	1	1	D	D	2	2	Y	Y	Y	Y	2	0	1	0
M	M																																																	
1	1																																																	
D	D																																																	
0	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	3																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A)	46150.00	560541.31	0.00																																															
(ii) Unitemized	3355.00	54166.00	150.00																																															
(iii) Total of contributions from individuals	49505.00	614716.91	150.00																																															
(b) Political Party Committees	0.00	129.20	0.00																																															
(c) Other Political Committees	27400.00	482000.00	0.00																																															

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
76905.00	1096846.11	150.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
7898.80	70.00	7898.80
15. OTHER RECEIPTS (Dividends, Interest, etc)		
190.07	2084.44	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
84993.87	1099000.55	8048.80

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Write or Type Committe Name

Langevin for Congress

Report the covering period

From:

10

14

2010

To:

11

22

2010

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
208283.44	1003606.89	21662.66
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
20000.00	45000.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)		
0.00	800.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))		
0.00	800.00	0.00
21. OTHER DISBURSEMENTS		
2000.00	13000.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
230283.44	1062406.89	21662.66

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

76905.00	1096046.11	150.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

200384.64	1003536.89	13763.86
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	387684.59
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	84993.87
25. SUBTOTAL(add Line 23 and Line 24)	472678.46
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	230283.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	242395.02

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Cathy L. Andreozzi

Mailing Address 383 Ocean Rd

City State Zip Code
Narragansett RI 02882-1363

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Tori Lynn Andreozzi Chairman
Foundation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: C4659924

Amount of Each Receipt this Period
2300.00

* In-Kind: Food and Beverage/Catering

B. Full Name (Last, First, Middle Initial)
Cathy L. Andreozzi

Mailing Address 383 Ocean Rd

City State Zip Code
Narragansett RI 02882-1363

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Tori Lynn Andreozzi Chairman
Foundation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4576724

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Andrew J. Annaldo

Mailing Address 2 Beloit St

City State Zip Code
Providence RI 02908-1206

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-employed Lobbyist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: C4643451

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 2900.00

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 8 / 75

(check only one)

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

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Michael Balasco

Mailing Address 206 Meshanticut Valley Pkwy

City State Zip Code
Cranston RI 02920-3743

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

Name of Employer Meridien Financial Group, Inc. Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: C4649993

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Richard R. Beretta, Jr., Esqui

Mailing Address 511 E Shore Rd

City State Zip Code
Jamestown RI 02835-1710

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

Name of Employer Adler, Pollock and Sheehan Occupation Attorney at Law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C4603980

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Richard S. Blackman

Mailing Address 175 Birkshire Dr

City State Zip Code
Warwick RI 02886-8605

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

Name of Employer The Blackman Insurance Agency Occupation Insurance Agent

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: C4585290

Amount of Each Receipt this Period

500.00

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: (check only one)	PAGE 9 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Christopher T. Blisard		Date of Receipt
	Mailing Address 8230 Dante Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Littleton	CO	80125-1824
	FEC ID number of contributing federal political committee. C		Transaction ID: C4574645
Name of Employer Circadence		Occupation Chief Operating Officer	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Robert M. Bolton		Date of Receipt
	Mailing Address 60 Joseph Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 1 0
	City	State	Zip Code
	Warwick	RI	02886-9544
	FEC ID number of contributing federal political committee. C		Transaction ID: C4642438
Name of Employer Arden Engineering		Occupation CEO	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) William F. Brennan, OD		Date of Receipt
	Mailing Address 100 Apple Tree Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	Warwick	RI	02888-5400
	FEC ID number of contributing federal political committee. C		Transaction ID: C4576645
Name of Employer Self-employed		Occupation Orthodontist	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Gilbert P. Bricault

Mailing Address 6 Williamsburg Dr

City State Zip Code
Westerly RI 02891-3032

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

Name of Employer Occupation
Self Employed Real Estate Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4577165

Amount of Each Receipt this Period
500.00

550.00

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

Mailing Address 8 Yznaga Ave

City State Zip Code
Newport RI 02840-4239

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

Name of Employer Occupation
Cosmetic Cosmos Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: C4568710

Amount of Each Receipt this Period
500.00

1500.00

C. Full Name (Last, First, Middle Initial)
Milton H. Bronstein

Mailing Address 34 Bennington Rd

City State Zip Code
Cranston RI 02920-5637

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: C4562756

Amount of Each Receipt this Period
100.00

600.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 11 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Stephen M. Brusini, Esquire

Mailing Address 105 Maplewood Dr

City State Zip Code
East Greenwich RI 02818-2518

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

Name of Employer Occupation
Orson and Brusini Ltd Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: C4572900

Amount of Each Receipt this Period
250.00

250.00

B.

Full Name (Last, First, Middle Initial)
Virginia M. Burke, Esquire

Mailing Address 17 Heritage Rd

City State Zip Code
Barrington RI 02806-2735

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

Name of Employer Occupation
RIHCA Executive Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4604046

Amount of Each Receipt this Period
150.00

150.00

C.

Full Name (Last, First, Middle Initial)
Ellen S. Calmas

Mailing Address 52 Fairway Rd

City State Zip Code
Chestnut Hill MA 02467-1818

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

Name of Employer Occupation
Self-employed Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4604574

Amount of Each Receipt this Period
1000.00

5400.00

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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 12 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
James J. Calmas

Mailing Address 345 Commonwealth Ave
Apt 10

City Boston State MA Zip Code 02115-1928

FEC ID number of contributing federal political committee. C

Name of Employer MFS Investment Management Occupation Investment Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: C4573986

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Michael J. Caparco, Sr.

Mailing Address 55 Holly Hill Ln

City Cranston State RI Zip Code 02921-2105

FEC ID number of contributing federal political committee. C

Name of Employer Capco Steel Corporation Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: C4591116

Amount of Each Receipt this Period 2000.00

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

Mailing Address 600 Mount Pleasant Ave
Rhode Island College

City Providence State RI Zip Code 02908-1940

FEC ID number of contributing federal political committee. C

Name of Employer Rhode Island College Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: C4576828

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) 3200.00

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 13 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Robert A. Catanzaro, Jr.
Mailing Address 115 Love Ln

City State Zip Code
Warwick RI 02886-8525

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

Name of Employer Occupation
Independence Bank President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: C4601273

Amount of Each Receipt this Period
100.00

450.00

B. Full Name (Last, First, Middle Initial)
Alfred R. Chatelle, Sr.
Mailing Address 18433 N Spanish Garden Dr

City State Zip Code
Sun City West AZ 85375-4759

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: C4591466

Amount of Each Receipt this Period
1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
Paul Choquette, Jr.
Mailing Address 57 Old Forge Rd

City State Zip Code
East Greenwich RI 02818-4602

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

Name of Employer Occupation
Gilbane Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: C4600155

Amount of Each Receipt this Period
300.00

700.00

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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 14 / 75
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Marc A. Crisafulli, Esquire

Mailing Address 366 Olney St

City Providence State RI Zip Code 02906-2318

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

Name of Employer: Hinckley, Allen and Snyder LLP
Occupation: Attorney at Law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: C4644228
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Mary Eileen Dolan-Hogrefe

Mailing Address 4940 Butterworth PI NW

City Washington State DC Zip Code 20016-4354

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

Name of Employer: National Organization on Disability
Occupation: Senior Advisor and Director of Public

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: C4576713
Amount of Each Receipt this Period: 250.00

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

Mailing Address 528 Ramona St

City Palo Alto State CA Zip Code 94301-1709

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

Name of Employer: TCV
Occupation: Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C4595433
Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► 3650.00

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 15 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Mary Ann Eacuello

Mailing Address 66 Cooke St

City Providence State RI Zip Code 02906-3122

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: C4644848
 Amount of Each Receipt this Period: 1600.00

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

Mailing Address 125 Wayland Ave

City Providence State RI Zip Code 02906-4302

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

Name of Employer Fiore and Asmussen, Inc. Occupation Accountant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: C4604051
 Amount of Each Receipt this Period: 300.00

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

Mailing Address 171 Heath St

City Chestnut Hill State MA Zip Code 02467-2806

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: C4608445
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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 16 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Terence M. Fracassa, Esquire
Mailing Address 30 Squantum Dr
City Warwick State RI Zip Code 02888-5318
FEC ID number of contributing federal political committee. **C**
Name of Employer Lepizzera and Laprocina Occupation Attorney at Law
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 20 / 2010
Transaction ID: C4576862
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Charles S. Fradin
Mailing Address 59 Manning St
City Providence State RI Zip Code 02906-3130
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00
Date of Receipt 11 / 02 / 2010
Transaction ID: C4655786
Amount of Each Receipt this Period 750.00

C. Full Name (Last, First, Middle Initial)
Shawn Friedkin
Mailing Address 3100 Westminster Dr
City Boca Raton State FL Zip Code 33496-2520
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Investor
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 28 / 2010
Transaction ID: C4608266
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00
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 17 / 75

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Langevin for Congress

A.

Full Name (Last, First, Middle Initial)

Barbara Goldsmith

Mailing Address 6 Deep Meadow Rd

City

Barrington

State

RI

Zip Code

02806-2740

FEC ID number of contributing federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For: 2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1045.00

Date of Receipt

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

Transaction ID: C4609368

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

A. Roger Guillemette

Mailing Address 10 Pike St

City

West Warwick

State

RI

Zip Code

02893-3612

FEC ID number of contributing federal political committee.

C

Name of Employer
Guill Tool and Engineerin-
g, Inc.

Occupation
Chief Executive Officer

Receipt For: 2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4576652

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Alan G. Hassenfeld

Mailing Address 85 Shore Rd

City

Bristol

State

RI

Zip Code

02809-1434

FEC ID number of contributing federal political committee.

C

Name of Employer
Hassenfeld Family Initi-
atives

Occupation
Chairman

Receipt For: 2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C4568783

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

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 18 / 75
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Thomas G. Hughes

Mailing Address 4289 Embassy Park Dr NW

City Washington State DC Zip Code 20016-3605

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2010
Transaction ID: C4643367
Amount of Each Receipt this Period 250.00

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

Mailing Address 100 Dean Ridge Blvd

City Cranston State RI Zip Code 02920-3650

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

Name of Employer Michael Integlia and Company Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt 11 / 01 / 2010
Transaction ID: C4650035
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Robert B. Jacquard

Mailing Address 34 Sagamore Rd

City Cranston State RI Zip Code 02920-4636

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

Name of Employer Self-employed Occupation Attorney at Law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 745.00

Date of Receipt 10 / 25 / 2010
Transaction ID: C4591023
Amount of Each Receipt this Period 250.00

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 19 / 75

(check only one)

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

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Peter D. Kiernan, Esquire

Mailing Address 428 Round Hill Rd

City State Zip Code
Greenwich CT 06831-2639

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

Name of Employer Occupation
Cyrus Capital Partners Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: C4591134

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Seth M. Klaiman

Mailing Address 2 Sweet Fern Trl

City State Zip Code
Saunderstown RI 02874-2353

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

Name of Employer Occupation
SMK Enterprises, LLC President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: C4650533

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Sharon M. Knickle

Mailing Address 99 Vaughn Ave

City State Zip Code
Warwick RI 02886-3126

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4609495

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

2100.00

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 20 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) June C. Langevin	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 318 Columbia Ave	Transaction ID: C4576767
	City State Zip Code Warwick RI 02888-3659	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) John J. Lanni, Esquire	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 199 Finch Ave	Transaction ID: C4576296
	City State Zip Code North Providence RI 02904-3303	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Attorney at Law Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Joseph R. Maloney	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Mailing Address 32 Tamarack Cir	Transaction ID: C4649160
	City State Zip Code North Kingstown RI 02852-4145	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Vanguard Home Medical Occupation President Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 545.00	

SUBTOTAL of Receipts This Page (optional)	700.00
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 21 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Joseph M. Marino		Date of Receipt
	Mailing Address 12 Paupock Run		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	Westerly	RI	02891-4004
	FEC ID number of contributing federal political committee. C		Transaction ID: C4576948
Name of Employer Rite Solutions		Occupation President	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
		<input type="text"/> 4800.00	

B.	Full Name (Last, First, Middle Initial) William J. Matuszak		Date of Receipt
	Mailing Address 82 Table Rock Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Wakefield	RI	02879-1825
	FEC ID number of contributing federal political committee. C		Transaction ID: C4573452
Name of Employer Adaptive Methods		Occupation Engineer	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 650.00	

C.	Full Name (Last, First, Middle Initial) Richard M. McAuliffe, Jr.		Date of Receipt
	Mailing Address 80 Fox Run		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 2 / 2 0 1 0
	City	State	Zip Code
	East Greenwich	RI	02818-1645
	FEC ID number of contributing federal political committee. C		Transaction ID: C4656723
Name of Employer The Mayforth Group		Occupation Government Relations	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 3000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Gregory A. Mercurio, Jr.
Mailing Address 20 Riata Dr
City Lincoln State RI Zip Code 02865-4958
FEC ID number of contributing federal political committee. **C**
Name of Employer Biotechnology Integration Management L Occupation Owner
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1450.00
Date of Receipt 10 / 27 / 2010
Transaction ID: C4604049
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Michael Moniz
Mailing Address 433 Canyonside Dr
City Boulder State CO Zip Code 80302-9740
FEC ID number of contributing federal political committee. **C**
Name of Employer Circadence Corp Occupation Executive
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00
Date of Receipt 10 / 19 / 2010
Transaction ID: C4573461
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Peter Christian Olivo
Mailing Address 1615 7th St
City Boulder State CO Zip Code 80302-5906
FEC ID number of contributing federal political committee. **C**
Name of Employer Circadence Corporation Occupation General Counsel
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 19 / 2010
Transaction ID: C4573597
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00
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 23 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Stacy Paterno

Mailing Address 65 New Meadow Rd

City State Zip Code
Barrington RI 02806-3724

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

Name of Employer Lifespan Occupation Senior Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 20 / 2010
Transaction ID: C4576154
 Amount of Each Receipt this Period: 250.00

Amount of Each Receipt this Period: 850.00

B. Full Name (Last, First, Middle Initial)
John R. Pesce

Mailing Address 5 Lori Ellen Dr

City State Zip Code
Lincoln RI 02865-4912

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

Name of Employer Coast Realty Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 01 / 2010
Transaction ID: C4650017
 Amount of Each Receipt this Period: 1000.00

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 5 Lori Ellen Dr

City State Zip Code
Lincoln RI 02865-4912

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 01 / 2010
Transaction ID: C4650026
 Amount of Each Receipt this Period: 1000.00

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 24 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
John H. Petrarca
Mailing Address 2 Michael Dr
City Lincoln State RI Zip Code 02865-4922
FEC ID number of contributing federal political committee. **C**
Name of Employer Providence Auto Body Occupation Owner
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt MM / DD / YYYY
10 / 27 / 2010
Transaction ID: C4604076
Amount of Each Receipt this Period 1500.00

B. Full Name (Last, First, Middle Initial)
Ken Pucker
Mailing Address 21 Berkeley St
City Newton State MA Zip Code 02465-2401
FEC ID number of contributing federal political committee. **C**
Name of Employer MBT Occupation Executive
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1750.00
Date of Receipt MM / DD / YYYY
10 / 28 / 2010
Transaction ID: C4608173
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Joseph A. Quattrocchi
Mailing Address 36 Roger Williams Dr
City Greenville State RI Zip Code 02828-2632
FEC ID number of contributing federal political committee. **C**
Name of Employer Douglas Oil Company Occupation Vice President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt MM / DD / YYYY
10 / 27 / 2010
Transaction ID: C4604083
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 25 / 75
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Patricia Recupero

Mailing Address 37 Elmway St

City State Zip Code
Providence RI 02906-4709

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

Name of Employer Occupation
Butler Hospital Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: C4642404

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John C. Revens, Jr., Esqui

Mailing Address 946 Centerville Rd

City State Zip Code
Warwick RI 02886-4398

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

Name of Employer Occupation
Revens, Revens and St. Pi-
erre Attorney at Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: C4608362

Amount of Each Receipt this Period
500.00

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

Mailing Address 132 Everett Ave

City State Zip Code
Providence RI 02906-4652

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

Name of Employer Occupation
Self-employed Attorney at Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: C4564018

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 26 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Kristina Rotella
Mailing Address 4 Pond View Ct
City Smithfield State RI Zip Code 02917-1773
FEC ID number of contributing federal political committee. **C**
Name of Employer K-Rae Productions Occupation President
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 450.00
Date of Receipt MM / DD / YYYY
10 / 27 / 2010
Transaction ID: C4604073
Amount of Each Receipt this Period 450.00

B. Full Name (Last, First, Middle Initial)
Janice G. Silvestri
Mailing Address 32 Cherry Hill Rd
City Johnston State RI Zip Code 02919-2605
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 400.00
Date of Receipt MM / DD / YYYY
11 / 01 / 2010
Transaction ID: C4650003
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Richard D. Sincere
Mailing Address 2424 Lincoln St
City Evanston State IL Zip Code 60201-2151
FEC ID number of contributing federal political committee. **C**
Name of Employer Sincere and Co. LC Occupation Chief Executive Officer
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 3550.00
Date of Receipt MM / DD / YYYY
10 / 17 / 2010
Transaction ID: C4567643
Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) 1600.00
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 27 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
James J. Skeffington, Esquire

Mailing Address 2800 Financial Plz
Fl 25

City State Zip Code
Providence RI 02903-2407

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

Name of Employer Occupation
Edwards, Angell, Palmer and Dodge Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: C4642519

Amount of Each Receipt this Period
1000.00

2000.00

B.

Full Name (Last, First, Middle Initial)
Richard I. Stark

Mailing Address 2007 N Upton St

City State Zip Code
Arlington VA 22207-2326

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

Name of Employer Occupation
National Organization on Disability VP for Military Programs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4576672

Amount of Each Receipt this Period
250.00

250.00

C.

Full Name (Last, First, Middle Initial)
Donald R. Sweitzer

Mailing Address 250 Major Potter Rd

City State Zip Code
Warwick RI 02886-9547

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

Name of Employer Occupation
GTech, Inc. Chairman of the Board

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: C4650031

Amount of Each Receipt this Period
1000.00

2500.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 28 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A. Full Name (Last, First, Middle Initial) Leslie W. Taito</p> <p>Mailing Address 34 Edmond Dr</p> <p>City State Zip Code North Kingstown RI 02852-2412</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Rhode Island Manufacturing Chief Executive Officer Extension</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Transaction ID: C4576307</p> <p>Amount of Each Receipt this Period 250.00</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) Richard S. Urquhart</p> <p>Mailing Address 16 Kalmer Rd</p> <p>City State Zip Code Warwick RI 02886-1718</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">550.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0</p> <p>Transaction ID: C4603833</p> <p>Amount of Each Receipt this Period 100.00</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) Alfred J. Verrecchia</p> <p>Mailing Address 136 Beacon Ave</p> <p>City State Zip Code Warwick RI 02889-6606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hasbro, Inc Chairman</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0</p> <p>Transaction ID: C4604271</p> <p>Amount of Each Receipt this Period 1000.00</p>
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SUBTOTAL of Receipts This Page (optional)	1350.00
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 29 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Carl Weinberg

Mailing Address 100 Beechwood Dr

City State Zip Code
Cranston RI 02921-3314

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

Name of Employer Occupation
Carl Weinberg and Company, LLP Accountant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: C4568681

Amount of Each Receipt this Period
800.00

4800.00

B. Full Name (Last, First, Middle Initial)
John Hazen White, Jr.

Mailing Address 16 Stone Tower Ln

City State Zip Code
Barrington RI 02806-4914

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

Name of Employer Occupation
TACO, Inc. Chief Executive Officer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C4655753

Amount of Each Receipt this Period
1500.00

4500.00

SUBTOTAL of Receipts This Page (optional) ► **2300.00**

TOTAL This Period (last page this line number only) ► **46150.00**

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

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

FOR LINE NUMBER: PAGE 30 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Nurse Practitioners PAC
Mailing Address PO Box 40473

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: C4659926
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC
Mailing Address 2400 N St NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C4591112
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EM
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: C4643446
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2100.00

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 31 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 1101 Vermont Ave NW
FI 12

City State Zip Code
Washington DC 20005-3521

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: C4572853

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Amgen, Inc. Political Action Committee

Mailing Address 555 13th St NW
Suite 600 West

City State Zip Code
Washington DC 20004-1109

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: C4608121

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G St NW

City State Zip Code
Washington DC 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

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

Transaction ID: C4609423

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION
 Mailing Address 100 Indiana Ave NW
 City State Zip Code
 Washington DC 20001-2143
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 1 0
Transaction ID: C4585297
 Amount of Each Receipt this Period
 3000.00
 FEC ID number of contributing federal political committee. **C** C00023580
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

B. Full Name (Last, First, Middle Initial)
Foley and Lardner Political Fund
 Mailing Address 3000 K St NW
 City State Zip Code
 Washington DC 20007-5124
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 1 0
Transaction ID: C4643511
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C** C00105338
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN
 Mailing Address 753 State Ave
 Ste 565
 City State Zip Code
 Kansas City KS 66101-2511
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 1 0
Transaction ID: C4600669
 Amount of Each Receipt this Period
 1500.00
 FEC ID number of contributing federal political committee. **C** C00005157
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3500.00

SUBTOTAL of Receipts This Page (optional) ► **5500.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION PAC

Mailing Address 17 Battery Pl

City State Zip Code
New York NY 10004-1207

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: C4579942

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Mailing Address 1750 New York Ave NW

City State Zip Code
Washington DC 20006-5305

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: C4642542

Amount of Each Receipt this Period
4600.00

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

Mailing Address 1771 N St NW

City State Zip Code
Washington DC 20036-2800

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4604761

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **8100.00**

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 34 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
National Association of Postal Supervisors PAC

Mailing Address 1727 King St
Ste 400

City Alexandria State VA Zip Code 22314-2700

FEC ID number of contributing federal political committee. **C** C00092957

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4604024

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS' ASSOCIATION PAC

Mailing Address 1100 S Washington St

City Alexandria State VA Zip Code 22314-4408

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: C4579928

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL MARINE MANUFACTURERS ASSOCIATION PAC

Mailing Address 444 N Capitol St NW
Ste 645

City Washington State DC Zip Code 20001-1559

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C4576180

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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 35 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
RHODE ISLAND RADIOLOGY SOCIETY PAC
Mailing Address PO Box 9045
City Providence State RI Zip Code 02940-9045
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
200.00
Date of Receipt 10 / 20 / 2010
Transaction ID: C4576944
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
UNITE HERE TIP CAMPAIGN COMMITTEE
Mailing Address 275 7th Ave
FI 11
City New York State NY Zip Code 10001-6756
FEC ID number of contributing federal political committee. **C** C00004861
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
6500.00
Date of Receipt 10 / 29 / 2010
Transaction ID: C4644851
Amount of Each Receipt this Period 1500.00

C. Full Name (Last, First, Middle Initial)
UTILITY WORKERS UNION OF AMERICA COPE
Mailing Address 815 16TH ST. NW
City WASHINGTON State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00040741
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
1000.00
Date of Receipt 10 / 23 / 2010
Transaction ID: C4585287
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2700.00
TOTAL This Period (last page this line number only) ► 27400.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 75
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Campaign Solutions Group

Mailing Address 8352 Clairemont Mesa Blvd

City State Zip Code
San Diego CA 92111-1302

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7898.80

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: C4664849

Amount of Each Receipt this Period
7898.80

SUBTOTAL of Receipts This Page (optional)	▶	7898.80
TOTAL This Period (last page this line number only)	▶	7898.80

**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 37 / 75
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) BankRI		Date of Receipt
	Mailing Address PO Box 9488		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Providence	RI	02940-9488
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer		Occupation	Transaction ID: C4664683
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="371.49"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="35.12"/>

B.	Full Name (Last, First, Middle Initial) Citizens Bank		Date of Receipt
	Mailing Address PO Box 9665		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Providence	RI	02940-9665
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer		Occupation	Transaction ID: C4664732
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="595.69"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="25.40"/>

C.	Full Name (Last, First, Middle Initial) Coastway Community Bank		Date of Receipt
	Mailing Address 1 Coastway Plz		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cranston	RI	02910-3247
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer		Occupation	Transaction ID: C4664730
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="465.05"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="27.03"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="87.55"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 38 / 75	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Home Loan and Investment Bank

Mailing Address 1 Home Loan Plz

City State Zip Code
Warwick RI 02886-1764

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
652.21

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Transaction ID: C4664731

Amount of Each Receipt this Period
102.52

SUBTOTAL of Receipts This Page (optional)	▶	102.52
TOTAL This Period (last page this line number only)	▶	190.07

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) ActBlue Mailing Address 14 Arrow St City Cambridge State MA Zip Code 02138-5106 Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285259 Date of Disbursement 10 / 27 / 2010 Amount of Each Disbursement this Period 1.98
B.	Full Name (Last, First, Middle Initial) ActBlue Mailing Address 14 Arrow St City Cambridge State MA Zip Code 02138-5106 Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285260 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 1.98
C.	Full Name (Last, First, Middle Initial) Adecco Employment Service Mailing Address 175 Broadhollow Rd City Melville State NY Zip Code 11747-4902 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285261 Date of Disbursement 11 / 17 / 2010 Amount of Each Disbursement this Period 142.50

SUBTOTAL of Disbursements This Page (optional) ▶	146.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Ms. Cathy L. Andreozzi Mailing Address 383 Ocean Rd City Narragansett State RI Zip Code 02882-1363 Purpose of Disbursement Reimbursement for Food and Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D285262 Date of Disbursement 11 / 08 / 2010 Amount of Each Disbursement this Period 217.56 Category/Type
B.	Full Name (Last, First, Middle Initial) Ms. Cathy L. Andreozzi Mailing Address 383 Ocean Rd City Narragansett State RI Zip Code 02882-1363 Purpose of Disbursement Food and Beverage/Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D282463 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 2300.00 * In-Kind Received
C.	Full Name (Last, First, Middle Initial) Bank Card Processing Mailing Address 280 Fore St City Portland State ME Zip Code 04101-4177 Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D287648 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 10.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2527.56

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Robert M. Bentsen	Transaction ID: D285263 Date of Disbursement 10 / 14 / 2010
	Mailing Address 200 Kirby Ave City Warwick State RI Zip Code 02889-6719 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 129.92 Category/Type
B.	Full Name (Last, First, Middle Initial) Mr. Richard R. Blott	Transaction ID: D285272 Date of Disbursement 10 / 14 / 2010
	Mailing Address 39 Touro St Apt 2 City Newport State RI Zip Code 02840-7118 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1081.29 Category/Type
C.	Full Name (Last, First, Middle Initial) Mr. Richard R. Blott	Transaction ID: D285273 Date of Disbursement 10 / 19 / 2010
	Mailing Address 39 Touro St Apt 2 City Newport State RI Zip Code 02840-7118 Purpose of Disbursement Reimbursement for Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 9.37 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1220.58

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Richard R. Blott	Transaction ID: D285274 Date of Disbursement 10 / 28 / 2010
	Mailing Address 39 Touro St Apt 2	Amount of Each Disbursement this Period 1081.29
	City Newport State RI Zip Code 02840-7118	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Richard R. Blott	Transaction ID: D285276 Date of Disbursement 11 / 11 / 2010
	Mailing Address 39 Touro St Apt 2	Amount of Each Disbursement this Period 30.67
	City Newport State RI Zip Code 02840-7118	
	Purpose of Disbursement Reimbursement for Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Richard R. Blott	Transaction ID: D285277 Date of Disbursement 11 / 12 / 2010
	Mailing Address 39 Touro St Apt 2	Amount of Each Disbursement this Period 1081.29
	City Newport State RI Zip Code 02840-7118	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2193.25
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of Rhode Island

Mailing Address 500 Exchange St

City Providence State RI Zip Code 02903-2629

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D287635

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

257.57

B. Full Name (Last, First, Middle Initial)
Ms. Ashley B. Bourdon

Mailing Address 34 Molloy St

City Providence State RI Zip Code 02908-4016

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D285280

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Amount of Each Disbursement this Period

70.11

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

Mailing Address 1600 Locust St

City Philadelphia State PA Zip Code 19103-6305

Purpose of Disbursement
Media Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D285284

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)

7827.68

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Campaign Solutions Group <hr/> Mailing Address 8352 Clairemont Mesa Blvd <hr/> City San Diego State CA Zip Code 92111-1302 <hr/> Purpose of Disbursement Get Out the Vote Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285286 Date of Disbursement 10 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 14950.00
B.	Full Name (Last, First, Middle Initial) Citizens Bank <hr/> Mailing Address PO Box 9665 <hr/> City Providence State RI Zip Code 02940-9665 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285288 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 2160.80
C.	Full Name (Last, First, Middle Initial) Citizens Bank <hr/> Mailing Address PO Box 9665 <hr/> City Providence State RI Zip Code 02940-9665 <hr/> Purpose of Disbursement Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285289 Date of Disbursement 10 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 21.00

SUBTOTAL of Disbursements This Page (optional) ▶

17131.80

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Citizens Bank</p> <p>Mailing Address PO Box 9665</p> <p>City Providence State RI Zip Code 02940-9665</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285290</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2479.42</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Citizens Bank</p> <p>Mailing Address PO Box 9665</p> <p>City Providence State RI Zip Code 02940-9665</p> <p>Purpose of Disbursement Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285291</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 21.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Citizens Bank</p> <p>Mailing Address PO Box 9665</p> <p>City Providence State RI Zip Code 02940-9665</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285293</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 3097.33</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5597.75

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Cox Communications Mailing Address 9 James P Murphy Ind Hwy City West Warwick State RI Zip Code 02893-2381 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285297 Date of Disbursement 11 / 10 / 2010 Amount of Each Disbursement this Period 118.00	
B.	Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 S Capitol St SE City Washington State DC Zip Code 20003-4024 Purpose of Disbursement Reimbursement for Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285299 Date of Disbursement 10 / 25 / 2010 Amount of Each Disbursement this Period 2122.00	
C.	Full Name (Last, First, Middle Initial) Mr. Richard DiRocco Mailing Address 17 Osgood Ave City Johnston State RI Zip Code 02919-4127 Purpose of Disbursement Entertainment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285301 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 150.00	

SUBTOTAL of Disbursements This Page (optional) ▶

2390.00

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 5565 Glenridge Connector NE Ste 2000</p> <p>City Atlanta State GA Zip Code 30342-4799</p> <p>Purpose of Disbursement Fee <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D287651 Date of Disbursement: <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>246.40</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1	0	246.40
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	1	0													
246.40																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 5565 Glenridge Connector NE Ste 2000</p> <p>City Atlanta State GA Zip Code 30342-4799</p> <p>Purpose of Disbursement Fee <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D287652 Date of Disbursement: <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>228.10</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1	0	228.10
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	1	0													
228.10																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 5565 Glenridge Connector NE Ste 2000</p> <p>City Atlanta State GA Zip Code 30342-4799</p> <p>Purpose of Disbursement Fee <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D287654 Date of Disbursement: <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>104.05</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1	0	104.05
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	1	0													
104.05																						

SUBTOTAL of Disbursements This Page (optional) ►

578.55

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel B. Gillis, III

Mailing Address 74 Aberdeen Ave

City Warwick State RI Zip Code 02888-4214

Purpose of Disbursement
Salary
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285302
Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

170.23

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel B. Gillis, III

Mailing Address 74 Aberdeen Ave

City Warwick State RI Zip Code 02888-4214

Purpose of Disbursement
Salary
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285303
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

510.79

C.

Full Name (Last, First, Middle Initial)
Mr. Daniel B. Gillis, III

Mailing Address 74 Aberdeen Ave

City Warwick State RI Zip Code 02888-4214

Purpose of Disbursement
Salary
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285304
Date of Disbursement

11 / 12 / 2010

Amount of Each Disbursement this Period

489.07

SUBTOTAL of Disbursements This Page (optional)

1170.09

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) JB Foley Printing	Transaction ID: D285306 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1469 Broad St	Amount of Each Disbursement this Period 2335.00
	City Providence State RI Zip Code 02905-2834	
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
B.	Full Name (Last, First, Middle Initial) JB Foley Printing	Transaction ID: D285307 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1469 Broad St	Amount of Each Disbursement this Period 314.58
	City Providence State RI Zip Code 02905-2834	
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
C.	Full Name (Last, First, Middle Initial) JB Foley Printing	Transaction ID: D285308 Date of Disbursement 11 / 04 / 2010
	Mailing Address 1469 Broad St	Amount of Each Disbursement this Period 1304.12
	City Providence State RI Zip Code 02905-2834	
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

3953.70

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) JB Foley Printing <hr/> Mailing Address 1469 Broad St <hr/> City Providence State RI Zip Code 02905-2834 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285309 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1178.03
B.	Full Name (Last, First, Middle Initial) JB Foley Printing <hr/> Mailing Address 1469 Broad St <hr/> City Providence State RI Zip Code 02905-2834 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285310 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 363.80
C.	Full Name (Last, First, Middle Initial) JB Foley Printing <hr/> Mailing Address 1469 Broad St <hr/> City Providence State RI Zip Code 02905-2834 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285311 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1960.00

SUBTOTAL of Disbursements This Page (optional) ▶

3501.83

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Jewish Voice and Herald

Mailing Address 130 Sessions St

City Providence State RI Zip Code 02906-3444

Purpose of Disbursement
Advertisement
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285312
Date of Disbursement

^M 1	^M 1	/	^D 1	^D 2	/	^Y 2	^Y 0	^Y 1	^Y 0
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Amount of Each Disbursement this Period

180.00

B.

Full Name (Last, First, Middle Initial)
Jobs for Justice

Mailing Address 280 Broadway Ste 201

City Providence State RI Zip Code 02903-3007

Purpose of Disbursement
Advertisement
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285332
Date of Disbursement

^M 1	^M 1	/	^D 1	^D 9	/	^Y 2	^Y 0	^Y 1	^Y 0
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Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Knight Street Holdings

Mailing Address 181 Knight St

City Warwick State RI Zip Code 02886-1296

Purpose of Disbursement
Rent
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D285315
Date of Disbursement

^M 1	^M 1	/	^D 0	^D 1	/	^Y 2	^Y 0	^Y 1	^Y 0
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Amount of Each Disbursement this Period

700.00

SUBTOTAL of Disbursements This Page (optional)

1130.00

TOTAL This Period (last page this line number only)

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A. Full Name (Last, First, Middle Initial) Liberty Concepts</p> <p>Mailing Address 119 Braintree St</p> <p>City Allston State MA Zip Code 02134-1628</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285316</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 6200.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Christina Morra</p> <p>Mailing Address 344 Williams St</p> <p>City Providence State RI Zip Code 02906-3844</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285317</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 372.94</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Christina Morra</p> <p>Mailing Address 344 Williams St</p> <p>City Providence State RI Zip Code 02906-3844</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285318</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 698.74</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7271.68

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) New World Lease Funding <hr/> Mailing Address 1979 Marcus Ave Ste 232 <hr/> City New Hyde Park State NY Zip Code 11042-1070 <hr/> Purpose of Disbursement Lease Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285321 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 875.00
B.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 5520 Connecticut Ave NW Ste 203 <hr/> City Washington State DC Zip Code 20015-2609 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285319 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 5520 Connecticut Ave NW Ste 203 <hr/> City Washington State DC Zip Code 20015-2609 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285320 Date of Disbursement 11 / 12 / 2010 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1875.00

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Daniel Parnes</p> <p>Mailing Address 34 Preston St</p> <p>City Providence State RI Zip Code 02906-3911</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285322 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 741.77</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Daniel Parnes</p> <p>Mailing Address 34 Preston St</p> <p>City Providence State RI Zip Code 02906-3911</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285323 Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 922.77</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Daniel Parnes</p> <p>Mailing Address 34 Preston St</p> <p>City Providence State RI Zip Code 02906-3911</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285324 Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 922.77</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2587.31

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Payroll Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285325 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 69.05</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Payroll Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285326 Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 49.69</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Payroll Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285327 Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 97.55</p>

SUBTOTAL of Disbursements This Page (optional) ▶

216.29

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Workers Compensation Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285328</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 32.20</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Workers Compensation Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285329</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 43.74</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 501 Wampanoag Trl</p> <p>City Riverside State RI Zip Code 02915-1507</p> <p>Purpose of Disbursement Workers Compensation Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285330</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 43.84</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

119.78

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PriMedia</p> <p>Mailing Address 1775 Bald Hill Rd</p> <p>City Warwick State RI Zip Code 02886-4231</p> <p>Purpose of Disbursement Television Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285331</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 125000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ms. Valerie Roberts</p> <p>Mailing Address 192 S Spruce St</p> <p>City East Providence State RI Zip Code 02914-2909</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285335</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 378.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ms. Valerie Roberts</p> <p>Mailing Address 192 S Spruce St</p> <p>City East Providence State RI Zip Code 02914-2909</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285336</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 378.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>125756.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Valerie Roberts

Transaction ID: D285338
Date of Disbursement

Mailing Address 192 S Spruce St

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	0

City East Providence State RI Zip Code 02914-2909

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary

378.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
SMK Enterprises, LLC

Transaction ID: D285340
Date of Disbursement

Mailing Address PO Box 9

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City Saunderstown State RI Zip Code 02874-0009

Amount of Each Disbursement this Period

Purpose of Disbursement
Financial Consulting

7000.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Raymond J. Sullivan

Transaction ID: D285342
Date of Disbursement

Mailing Address 2 Cornell Ct

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

City Coventry State RI Zip Code 02816-4230

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary

2012.20

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

9390.20

TOTAL This Period (last page this line number only)

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Raymond J. Sullivan

Transaction ID: D285343
Date of Disbursement

Mailing Address 2 Cornell Ct

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

City Coventry State RI Zip Code 02816-4230

Amount of Each Disbursement this Period

2012.20

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mr. Raymond J. Sullivan

Transaction ID: D285344
Date of Disbursement

Mailing Address 2 Cornell Ct

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	0

City Coventry State RI Zip Code 02816-4230

Amount of Each Disbursement this Period

2012.20

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Raymond J. Sullivan

Transaction ID: D285345
Date of Disbursement

Mailing Address 2 Cornell Ct

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	0

City Coventry State RI Zip Code 02816-4230

Amount of Each Disbursement this Period

1159.46

Purpose of Disbursement
Salary

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5183.86

TOTAL This Period (last page this line number only)

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**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sutton Plaza Apartments</p> <p>Mailing Address 1230 13th St NW</p> <p>City Washington State DC Zip Code 20005-5121</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285347</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1295.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 399 Bald Hill Rd</p> <p>City Warwick State RI Zip Code 02886-1634</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285353</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 159.08</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 399 Bald Hill Rd</p> <p>City Warwick State RI Zip Code 02886-1634</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285355</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 163.56</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1617.64

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D285349 Date of Disbursement 10 / 20 / 2010
	Mailing Address PO Box 28007	Amount of Each Disbursement this Period 185.81
	City Lehigh Valley State PA Zip Code 18002-8007	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D285350 Date of Disbursement 11 / 19 / 2010
	Mailing Address PO Box 28007	Amount of Each Disbursement this Period 200.50
	City Lehigh Valley State PA Zip Code 18002-8007	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D285629 Date of Disbursement 11 / 10 / 2010
	Mailing Address PO Box 1270	Amount of Each Disbursement this Period 4432.12
	City Newark State NJ Zip Code 07101-1270	
	Purpose of Disbursement Credit Card Payment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4818.43
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Acme Pizza And Wine</p> <p>Mailing Address 166 Valley St</p> <p>City Providence State RI Zip Code 02909-2400</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285668</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="281.93"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 1401 Bald Hill Rd</p> <p>City Warwick State RI Zip Code 02886-4240</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285676</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="64.19"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Capitol Host</p> <p>Mailing Address Rayburn House B-339B</p> <p>City Washington State DC Zip Code 20515-0001</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285641</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1210.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A. Full Name (Last, First, Middle Initial) Carmine's</p> <p>Mailing Address 425 7th St NW</p> <p>City Washington State DC Zip Code 20004-2229</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285652</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="749.13"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Carmine's</p> <p>Mailing Address 425 7th St NW</p> <p>City Washington State DC Zip Code 20004-2229</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285653</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Eleven Forty Nine Restaurant</p> <p>Mailing Address 1149 Division Rd</p> <p>City East Greenwich State RI Zip Code 02818-2050</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285643</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.51"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Lowe's Home Improvement Mailing Address 555 Greenwich Ave City Warwick State RI Zip Code 02886-1814 Purpose of Disbursement: Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285658 Date of Disbursement 09 / 20 / 2010	Amount of Each Disbursement this Period 21.14 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Lowe's Home Improvement Mailing Address 555 Greenwich Ave City Warwick State RI Zip Code 02886-1814 Purpose of Disbursement: Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285659 Date of Disbursement 10 / 04 / 2010	Amount of Each Disbursement this Period 37.35 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) OfficeMax Mailing Address 200 Hillside Rd City Cranston State RI Zip Code 02920-5620 Purpose of Disbursement: Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285667 Date of Disbursement 09 / 22 / 2010	Amount of Each Disbursement this Period 37.38 [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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) OfficeMax</p> <p>Mailing Address 200 Hillside Rd</p> <p>City Cranston State RI Zip Code 02920-5620</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285640</p> <p>Date of Disbursement 09 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 23.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) OfficeMax</p> <p>Mailing Address 200 Hillside Rd</p> <p>City Cranston State RI Zip Code 02920-5620</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285669</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 28.88</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) OfficeMax</p> <p>Mailing Address 200 Hillside Rd</p> <p>City Cranston State RI Zip Code 02920-5620</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285670</p> <p>Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 69.25</p> <p>[MEMO ITEM]</p>

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 671 Main St City East Greenwich State RI Zip Code 02818-3615 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285636 Date of Disbursement 10 / 02 / 2010 Amount of Each Disbursement this Period 30.50 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 671 Main St City East Greenwich State RI Zip Code 02818-3615 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285637 Date of Disbursement 10 / 03 / 2010 Amount of Each Disbursement this Period 17.35 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 671 Main St City East Greenwich State RI Zip Code 02818-3615 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285638 Date of Disbursement 10 / 06 / 2010 Amount of Each Disbursement this Period 17.35 [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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 671 Main St City East Greenwich State RI Zip Code 02818-3615 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285639 Date of Disbursement 09 / 24 / 2010 Amount of Each Disbursement this Period -2.50 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2425 Wyman St City Dallas State TX Zip Code 75235-2501 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285631 Date of Disbursement 09 / 16 / 2010 Amount of Each Disbursement this Period 5.00 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2425 Wyman St City Dallas State TX Zip Code 75235-2501 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D285632 Date of Disbursement 09 / 23 / 2010 Amount of Each Disbursement this Period 293.40 [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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: D285634 Date of Disbursement 09 / 22 / 2010
	Mailing Address 2425 Wyman St	Amount of Each Disbursement this Period 250.40
	City Dallas State TX Zip Code 75235-2501	
	Purpose of Disbursement Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D285671 Date of Disbursement 09 / 30 / 2010
	Mailing Address 400 Bald Hill Rd	Amount of Each Disbursement this Period 12.29
	City Warwick State RI Zip Code 02886-1633	
	Purpose of Disbursement Supplies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United States Postmaster	Transaction ID: D285656 Date of Disbursement 10 / 13 / 2010
	Mailing Address 24 Corliss St	Amount of Each Disbursement this Period 88.00
	City Providence State RI Zip Code 02904-2457	
	Purpose of Disbursement Postage	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
United States Postmaster

Mailing Address 24 Corliss St

City State Zip Code
Providence RI 02904-2457

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D285650

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

208205.44

**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)

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<input type="checkbox"/>	17	<input checked="" type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Transaction ID: D285298

Date of Disbursement

Mailing Address 430 S Capitol St SE
FI 2

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	1		0	1		2	0	1	0

City Washington State DC Zip Code 20003-4024

Amount of Each Disbursement this Period

20000.00

Purpose of Disbursement
Transfer of Campaign Funds

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

20000.00

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

20000.00

**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 72 / 75

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Langevin for Congress

A.

Full Name (Last, First, Middle Initial)
Cicilline Committee

Mailing Address PO Box 9107

City State Zip Code
Providence RI 02940-9107

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D285287

Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Money's Worth	Nature of Debt (Purpose): Phone bank expense
Mailing Address 815 Reservoir Ave	
City Cranston State RI ZIP Code 02910-4442	

Outstanding Balance Beginning This Period 1222.34	Transaction ID: D51	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1222.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Money's Worth	Nature of Debt (Purpose): Phone bank
Mailing Address 815 Reservoir Ave	
City Cranston State RI ZIP Code 02910-4442	

Outstanding Balance Beginning This Period 800.00	Transaction ID: D615	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Money's Worth	Nature of Debt (Purpose): Phone bank
Mailing Address 815 Reservoir Ave	
City Cranston State RI ZIP Code 02910-4442	

Outstanding Balance Beginning This Period 800.00	Transaction ID: D715	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 800.00

1) SUBTOTALS This Period This Page (optional).....	2822.34
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honorable Joseph R. Paolino, Jr.			Nature of Debt (Purpose): 1 month rent for Providence office
Mailing Address 10 Orchard Ave			
City Providence	State RI	ZIP Code 02906-5418	

Outstanding Balance Beginning This Period 200.00		Transaction ID: D779	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honorable Joseph R. Paolino, Jr.			Nature of Debt (Purpose): 2 months rent for Providence office
Mailing Address 10 Orchard Ave			
City Providence	State RI	ZIP Code 02906-5418	

Outstanding Balance Beginning This Period 400.00		Transaction ID: D50	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honorable Joseph R. Paolino, Jr.			Nature of Debt (Purpose): 2 months rent for Providence office
Mailing Address 10 Orchard Ave			
City Providence	State RI	ZIP Code 02906-5418	

Outstanding Balance Beginning This Period 400.00		Transaction ID: D613	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00	

1) SUBTOTALS This Period This Page (optional).....	1000.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Langevin for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Honorable Joseph R. Paolino, Jr.

Nature of Debt (Purpose):
1 month rent for Providence office

Mailing Address 10 Orchard Ave

City	State	ZIP Code
Providence	RI	02906-5418

Outstanding Balance Beginning This Period

200.00

Transaction ID: D716

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

200.00

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

4022.34

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

4022.34