

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		54799.15
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	42797.14									
(c) Total Receipts (from Line 19)	12416.55	139893.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55213.69	194692.91								
7. Total Disbursements (from Line 31)	15367.30	154846.52								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39846.39	39846.39								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	5254.47									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	200.00	19500.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	225.00	925.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	425.00	20425.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5650.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	425.00	26075.60
12. Transfers From Affiliated/Other Party Committees	3100.00	23786.80
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1247.80	36675.57
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	7643.75	51891.92
(b) Levin Funds (from Schedule H5)	0.00	1463.87
(c) Total Transfer (add 18(a) and 18(b)).	7643.75	53355.79
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12416.55	139893.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4772.80	86537.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4796.16	35260.13
(ii) Non-Federal Share.....	8526.47	61787.36
(b) Other Federal Operating Expenditures.....	3434.67	43611.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	16757.30	140659.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	1262.44
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	-1390.00	12924.94
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	-1390.00	12924.94
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15367.30	154846.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6840.83	93059.16

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	425.00	26075.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	425.00	26075.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8230.83	78871.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	1247.80	36675.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6983.03	42196.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) MRS KAREN BLACK	Date of Receipt MM / DD / YYYY 07 / 16 / 2007
	Mailing Address 275 MEADOW TREE FARM RD	Transaction ID: SA11AI.14660
	City State Zip Code SAUNDERSTOWN RI 02874	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Dollars for Democrats
Name of Employer SOUTH COUNTY HOSPITAL	Occupation REGISTERED NURSE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B.	Full Name (Last, First, Middle Initial) MRS KAREN BLACK	Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address 275 MEADOW TREE FARM RD	Transaction ID: SA11AI.14661
	City State Zip Code SAUNDERSTOWN RI 02874	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Dollars for Democrats
Name of Employer SOUTH COUNTY HOSPITAL	Occupation REGISTERED NURSE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

C.	Full Name (Last, First, Middle Initial) Robert Cohen	Date of Receipt MM / DD / YYYY 09 / 06 / 2007
	Mailing Address 150 Union Street Apt. 604	Transaction ID: SA11AI.14628
	City State Zip Code Providence RI 02903	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Dollars for Democrats
Name of Employer Student	Occupation Student	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 27
(check only one)

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

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

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

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt MM / DD / YYYY
09 / 30 / 2007

Transaction ID: SA11AI.14670

Amount of Each Receipt this Period
1752.75

RI Party Victory Fund Uni-temized

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. Michael Kopeski, Sr
Mailing Address 36 Tourtellot Hill Rd

City Chepachet State RI Zip Code 02814

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

Name of Employer Occupation
Dinos Park And Shop Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt MM / DD / YYYY
09 / 20 / 2007

Transaction ID: SA11AI.14667

Amount of Each Receipt this Period
71.25

RI Party Victory Fund

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mr. Michael Kopeski, Sr
Mailing Address 36 Tourtellot Hill Rd

City Chepachet State RI Zip Code 02814

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

Name of Employer Occupation
Dinos Park And Shop Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt MM / DD / YYYY
09 / 21 / 2007

Transaction ID: SA11AI.14666

Amount of Each Receipt this Period
71.25

RI Party Victory Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 27

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Harold Nomer

Mailing Address 2717 P Perry Hwy

City State Zip Code
Wakefield RI 02879

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 09 / 20 / 2007

Transaction ID: SA11AI.14669

Amount of Each Receipt this Period 237.50

RI Party Victory Fund

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Mr. Marvin Perry

Mailing Address 21 Smith St

City State Zip Code
Bristol RI 02809

FEC ID number of contributing federal political committee. C

Name of Employer R I D L T Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 09 / 20 / 2007

Transaction ID: SA11AI.14664

Amount of Each Receipt this Period 95.00

RI Party Victory Fund

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
UNITEMIZED CONTRIBUTIONS

Mailing Address 430 S CAPITOL ST SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 09 / 30 / 2007

Transaction ID: SA11AI.14662

Amount of Each Receipt this Period 2095.00

Dollars for Democrats

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A.	Full Name (Last, First, Middle Initial) UNITEMIZED CONTRIBUTIONS		Date of Receipt
	Mailing Address 430 S CAPITOL ST SE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	WASHINGTON	DC	20003
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	ASDC Partnership Program Unitemized
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="00"/>	
			Transaction ID: SA11AI.14671
			Amount of Each Receipt this Period <input type="text" value="53.32"/>
			[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="200.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 27
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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

A.

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

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22700.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2007

Transaction ID: SA12.14623

Amount of Each Receipt this Period
3100.00

In-kind - Voter file access

SUBTOTAL of Receipts This Page (optional)	▶	3100.00
TOTAL This Period (last page this line number only)	▶	3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 27
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) National Grid		Date of Receipt
Mailing Address Processing Center		<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
City State Zip Code Woburn MA 01807		<input type="text"/> 09 <input type="text"/> 20 <input type="text"/> 2007
FEC ID number of contributing federal political committee. C		Transaction ID: SA15.14622
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1024.80
Aggregate Year-to-Date ▼ <input type="text"/> 1137.38		Deposit Refund

B.

Full Name (Last, First, Middle Initial) Josh Panger		Date of Receipt
Mailing Address 7101 Zoar Avenue		<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
City State Zip Code Lubbock TX 79424		<input type="text"/> 09 <input type="text"/> 18 <input type="text"/> 2007
FEC ID number of contributing federal political committee. C		Transaction ID: SA15.14594
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 223.00
Aggregate Year-to-Date ▼ <input type="text"/> 1784.00		Cobra payment

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1247.80
TOTAL This Period (last page this line number only)	<input type="text"/> 1247.80

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 27

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

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

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

Mailing Address PO Box 1057

City Providence State RI Zip Code 02901

Purpose of Disbursement
Cobra health insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.14608

Date of Disbursement

09 / 24 / 2007

Amount of Each Disbursement this Period

223.23

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

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-kind - Voter file access

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.14624

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

3100.00

SUBTOTAL of Disbursements This Page (optional) ►

3323.23

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

3323.23

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 13 / 27 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

Transaction ID: SC/9.5183

LOAN SOURCE Full Name (Last, First, Middle Initial) Licht 88 Committee	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 350 Cole Avenue	
City Providence State RI ZIP Code 02906	

Original Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: right;">5249.87</div>	Cumulative Payment To Date <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	Balance Outstanding at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">5249.87</div>
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TERMS

Date Incurred <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 1 9 8 8</div> </div>	Date Due <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	Interest Rate <div style="border: 1px solid black; width: 100%; height: 20px;"></div> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 20px;"></div>

SUBTOTALS This Period This Page (optional)	<div style="border: 1px solid black; padding: 2px; text-align: right;">5249.87</div>
TOTALS This Period (last page in this line only)	<div style="border: 1px solid black; padding: 2px; text-align: right;">5249.87</div>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SHELDON II WHITEHOUSE

Mailing Address 32 ELMGROVE AVENUE

City	State	ZIP Code
PROVIDENCE	RI	02906

Nature of Debt (Purpose):
Coordinated expenditures overage

Outstanding Balance Beginning This Period		Transaction ID: SD9.14176	
	4.60		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4.60	

1) SUBTOTALS This Period This Page (optional).....	▶	4.60
2) TOTALS This Period (last page this line number only).....	▶	4.60
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	5249.87
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	5254.47

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

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

NAME OF ACCOUNT RI Democratic Non-federal Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 7643.75
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	7643.75	Transaction ID: H3.14625
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	7643.75
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	7643.75

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) United States Treasury			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660351			Allocated Activity or Event Year-To-Date 84221.17		
City Dallas	State TX	Zip Code 75266	Date <input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Payroll tax deposit			Transaction ID: H4.14604		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.08		588.58		919.66

B. Full Name (Last, First, Middle Initial) Cox Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 84378.17		
City Newark	State NJ	Zip Code 07101	Date <input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Monthly modem and cable			Transaction ID: H4.14595		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.52		100.48		157.00

C. Full Name (Last, First, Middle Initial) Susann Della Rosa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 60 Don Avenue			Allocated Activity or Event Year-To-Date 86228.17		
City Rumford	State RI	Zip Code 02916	Date <input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Accounting Services-non employee			Transaction ID: H4.14596		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.00		1184.00		1850.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1053.60		1873.06		2926.66

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) EMC Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 7911			Allocated Activity or Event Year-To-Date 87676.17	
City Warwick	State RI	Zip Code 02887	Date M M / D D / Y Y Y Y 09 / 07 / 2007 Transaction ID: H4.14598	
Purpose of Disbursement: Property/Liability Insurance				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
521.28		926.72		1448.00

B. Full Name (Last, First, Middle Initial) Pui O			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 249 Roosevelt Avenue			Allocated Activity or Event Year-To-Date 88476.17	
City Pawtucket	State RI	Zip Code 02860	Date M M / D D / Y Y Y Y 09 / 07 / 2007 Transaction ID: H4.14603	
Purpose of Disbursement: September rent and electricity				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.00		512.00		800.00

C. Full Name (Last, First, Middle Initial) Timothy Grilo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 481 Charles Street			Allocated Activity or Event Year-To-Date 90296.77	
City Providence	State RI	Zip Code 02904	Date M M / D D / Y Y Y Y 09 / 14 / 2007 Transaction ID: H4.14599	
Purpose of Disbursement: Net wages				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
655.42		1165.18		1820.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1464.70		2603.90		4068.60

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) United States Treasury			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660351			Allocated Activity or Event Year-To-Date 91216.43		
City Dallas	State TX	Zip Code 75266	Date <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Payroll tax deposit			Transaction ID: H4.14605		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.08		588.58		919.66

B. Full Name (Last, First, Middle Initial) Division of Taxation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Capitol Hill			Allocated Activity or Event Year-To-Date 91496.53		
City Providence	State RI	Zip Code 02908	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: State Payroll taxes			Transaction ID: H4.14597		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.84		179.26		280.10

C. Full Name (Last, First, Middle Initial) IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 30069			Allocated Activity or Event Year-To-Date 91719.53		
City Hartford	State CT	Zip Code 06150	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Copier Lease			Transaction ID: H4.14601		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.28		142.72		223.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
512.20		910.56		1422.76

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address
Turnkey Station

City	State	Zip Code
Providence	RI	02940

Purpose of Disbursement:
Post office box annual rental

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91823.53

Date 09 / 24 / 2007

Transaction ID: H4.14602

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.44		66.56		104.00

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

Mailing Address
P.O. 1

City	State	Zip Code
Worcester	MA	01654

Purpose of Disbursement:
Telephone service

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92057.06

Date 09 / 24 / 2007

Transaction ID: H4.14607

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.07		149.46		233.53

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

Mailing Address
PO Box 1057

City	State	Zip Code
Providence	RI	02901

Purpose of Disbursement:
Employee Health Insurance

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92503.52

Date 09 / 24 / 2007

Transaction ID: H4.14611

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.73		285.73		446.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
282.24		501.75		783.99

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) William Lynch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 321 South Main Street			Allocated Activity or Event Year-To-Date 92578.52																						
City	State	Zip Code	Date <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>0</td><td>9</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.14612			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	4	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	2	4	/	2	0	0	7																
Providence	RI	02903																							
Purpose of Disbursement: Reimburse taxi fares			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.00		48.00		75.00

B. Full Name (Last, First, Middle Initial) City Cab			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1512 Marsh Avenue			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <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>0</td><td>9</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.14616			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	6	/	2	0	0	7																
Kansas City	MO	64106																							
Purpose of Disbursement: Taxi fare			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.00		48.00		75.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 300 South Riverside Plaza			Allocated Activity or Event Year-To-Date 93883.88																						
City	State	Zip Code	Date <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>0</td><td>9</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.14613			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	4	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	2	4	/	2	0	0	7																
Chicago	IL	60606																							
Purpose of Disbursement: Credit Card Payment			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
469.92		835.44		1305.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
496.92		883.44		1380.36

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
Camille's

Mailing Address
71 Bradford Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting 8/29/07

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14618

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.95		158.14		247.09

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

Mailing Address
One Finance Way

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14619

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.85		307.29		480.14

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

Mailing Address
123 Empire Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: H4.14620

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.87		19.33		30.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
Italo American Club

Mailing Address
477 Broadway

City	State	Zip Code
Providence	RI	02909

Purpose of Disbursement:
Meeting

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 09 / 05 / 2007

Transaction ID: H4.14621

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.25		350.68		547.93

B. Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address
PO Box 660351

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement:
Payroll tax deposit

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94803.54

Activity or Event Identifier:
Administrative

Date 09 / 27 / 2007

Transaction ID: H4.14606

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.08		588.58		919.66

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

Mailing Address
481 Charles Street

City	State	Zip Code
Providence	RI	02904

Purpose of Disbursement:
Net wages

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

96624.14

Activity or Event Identifier:
Administrative

Date 09 / 28 / 2007

Transaction ID: H4.14600

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
655.42		1165.18		1820.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
986.50		1753.76		2740.26

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
4796.16	8526.47	13322.63

Image# 28930598308

Form/Schedule: **F3XA**

The loan on Schedule C has no interest rate and no determined due date. The unitemized items for Line 30 (b) were stale dated checks for canvasser stipends. Schedule Memo A's from joint fundraisers are distributed on a different schedule than transfers. No employee spent more than 25% of their compensated time on Federal Election Activity or activities in connection with a Federal Election.

Transaction ID:

Form/Schedule: **SA11AI** Dollars For Democrats

Transaction ID: **SA11AI.14660**

Image# 28930598309

Form/Schedule: **SA11AI** Dollars For Democrats

Transaction ID: **SA11AI.14661**

Form/Schedule: **SA11AI** RI Party Victory Fund Unitemized

Transaction ID: **SA11AI.14670**

Image# 28930598310

Form/Schedule: **SA11AI** RI Party Victory Fund
Transaction ID: **SA11AI.14667**

Form/Schedule: **SA11AI** RI Party Victory Fund
Transaction ID: **SA11AI.14666**

Image# 28930598311

Form/Schedule: **SA11AI** RI Party Victory Fund
Transaction ID: **SA11AI.14669**

Form/Schedule: **SA11AI** RI Party Victory Fund
Transaction ID: **SA11AI.14664**

Image# 28930598312

Form/Schedule: **SA11AI** Dollars For Democrats
Transaction ID: **SA11AI.14662**

Form/Schedule: **SA11AI** ASDC Partnership Program
Transaction ID: **SA11AI.14671**
