

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Rhode Island Democratic State Committee

ADDRESS (number and street) P.O. Box 6004

Check if different than previously reported. (ACC)

Providence RI 02940

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00136200

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

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)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on 11 / 06 / 2018 in the State of RI

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

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

Election on / / in the State of

5. Covering Period 10 / 01 / 2018 through 10 / 17 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Padwa, Jeffrey, , ,

Type or Print Name of Treasurer

Signature of Treasurer Padwa, Jeffrey, , , [Electronically Filed] Date 06 / 05 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Rhode Island Democratic State Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		28672.90
(b) Cash on Hand at Beginning of Reporting Period.....	321407.80	
(c) Total Receipts (from Line 19)	324586.79	1869618.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	645994.59	1898291.16
7. Total Disbursements (from Line 31).....	322070.93	1574367.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	323923.66	323923.66
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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33000.00	790500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	33000.00	790500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	29500.00	149011.20
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	62500.00	939511.20
12. Transfers From Affiliated/Other Party Committees.....	163444.58	548402.91
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
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	6042.09
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	49829.13	268030.72
(b) Levin Funds (from Schedule H5)	48813.08	107631.34
(c) Total Transfers (add 18(a) and 18(b))..	98642.21	375662.06
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	324586.79	1869618.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	225944.58	1493956.20

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	14168.44	98140.50
(ii) Non-Federal Share.....	53298.64	369102.74
(b) Other Federal Operating Expenditures	23859.20	155449.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	91326.28	622692.99
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 Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	12975.63	34984.19
(ii) "Levin" Share.....	48813.08	131607.15
(b) Federal Election Activity Paid Entirely With Federal Funds	168955.94	785083.17
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	230744.65	951674.51
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	322070.93	1574367.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	219959.21	1073657.61

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	62500.00	939511.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62500.00	939511.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	38027.64	253590.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38027.64	253590.25

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

Form/Schedule: F3XA

Transaction ID :

The loan on Schedule C has no interest rate and no determined due date.
Expenditures reported on Schedule H4 for Employees' Net Wages, Federal and State Payroll Taxes, Health Insurance did not work more than 25% on a Federal Campaign,

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 114
	<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	

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

A. Alba-Wilbur, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Crest Circle
 City Smithfield State RI Zip Code 02917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physical Therapy Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.33804
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Aparicio, Mary Ann Zynsky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 Olney Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33785
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Babineau, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Holly Lane
 City Barrington State RI Zip Code 02806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lifespan Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33787
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
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: (check only one)	PAGE 8 OF 114
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Baptista, Ernest, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 Crothers Avenue
 City Cranston State RI Zip Code 02910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gencorp Insurance Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33748
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Crown, Paula, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 N. LaSalle
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 02 / 2018
Transaction ID : SA11AI.33792
 Amount of Each Receipt this Period 4000.00
 Memo Item

C. Harris, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 251 George Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33753
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
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: (check only one)	PAGE 9 OF 114
	<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

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

A. Murdoch, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 E 26th St
 Ste 602
 City New York State NY Zip Code 10010-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 21CF Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 14 / 2018
Transaction ID : SA11AI.33765
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. Murray, J. Terrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 El Brillo Way
 City Palm Beach State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 02 / 2018
Transaction ID : SA11AI.33795
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Picerne, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 Lambert Lind Hwy
 City Warwick State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Picerne Properties Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 02 / 2018
Transaction ID : SA11AI.33796
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 20000.00
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: (check only one)	PAGE 10 OF 114
	<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	

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

A. Sweitzer, Donald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 Major Potter Road
 City Warwick State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IGT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 03 / 2018
Transaction ID : SA11AI.33749
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Tansey, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 Bristol Ferry Road
 City Portsmouth State RI Zip Code 02871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33751
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Wyman, Julia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Briarfield Road
 City Barrington State RI Zip Code 02806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RI Sea Grant Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.33783
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	33000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AMERICA WORKS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 15293

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00331694

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA11C.33763

Amount of Each Receipt this Period
5000.00

Memo Item

B. BIG SKY VALUES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3242 CUMMINS WAY

City MISSOULA	State MT	Zip Code 59802
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FEC ID number of contributing federal political committee. **C** C00650754

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA11C.33805

Amount of Each Receipt this Period
1000.00

Memo Item

C. Emily's List
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M Street NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2018

Transaction ID : SA11C.33758

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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: (check only one)	PAGE 12 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. END CITIZENS UNITED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 66005

City WASHINGTON	State DC	Zip Code 20035
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FEC ID number of contributing federal political committee. **C** C00573261

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2018

Transaction ID : SA11C.33755

Amount of Each Receipt this Period

2500.00

 Memo Item

B. M-PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 607 14th Street N.W.
Suite 800

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00365270

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2018

Transaction ID : SA11C.33762

Amount of Each Receipt this Period

5000.00

 Memo Item

C. Machinists Non-Partisan Political League
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9000 Machinist PL

City Upper Marlboro	State MD	Zip Code 20772
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C70000435

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

Transaction ID : SA11C.33797

Amount of Each Receipt this Period

5000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: (check only one)	PAGE 13 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. NARRAGANSETT BAY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 8628

City Cranston	State RI	Zip Code 02920
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00403592

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

Transaction ID : SA11C.33759

Amount of Each Receipt this Period
5000.00

Memo Item

B. SIEMENS CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 NEW JERSEY AVENUE, NW
SUITE 1000

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2018

Transaction ID : SA11C.33764

Amount of Each Receipt this Period
1000.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	29500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
97119.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2018

Transaction ID : SA12.33794

Amount of Each Receipt this Period
29583.38

Memo Item
Transfer

B. Rintels, Peter, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 161 Power Street

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Heme Oncology Association Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : SA12.33794.0

Amount of Each Receipt this Period
1000.00

Memo Item
ActBlue

C. Winsor, Ellen, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 736 East Shore Road

City Jamestown	State RI	Zip Code 02835
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Self-Employed Policy Advocate

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : SA12.33794.1

Amount of Each Receipt this Period
2700.00

Memo Item
ActBlue

SUBTOTAL of Receipts This Page (optional).....	29583.38
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: (check only one)	PAGE 15 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. King, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 Slater Avenue
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Editor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA12.33794.2
 Amount of Each Receipt this Period 2500.00
 Memo Item ActBlue

B. Nichols, Dane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1521 29th Street NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 27 / 2018
Transaction ID : SA12.33794.3
 Amount of Each Receipt this Period 1000.00
 Memo Item ActBlue

C. Galvin, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Jeffrey Drive
 City No Attleboro State MA Zip Code 02760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAA Northeast Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 26 / 2018
Transaction ID : SA12.33794.4
 Amount of Each Receipt this Period 5000.00
 Memo Item ActBlue

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: (check only one)	PAGE 16 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Copp, Belton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Keene Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fall River Public Schools Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2018
Transaction ID : SA12.33794.5
 Amount of Each Receipt this Period 250.00
 Memo Item
 ActBlue

B. Brewster, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 Congdon Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Topping Fund LLC Occupation (for Individual) Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2018
Transaction ID : SA12.33794.6
 Amount of Each Receipt this Period 2500.00
 Memo Item
 ActBlue

C. Rockefeller, Clay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 Kinsley Avenue
 City Providence State RI Zip Code 02909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2018
Transaction ID : SA12.33794.7
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

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: (check only one)	PAGE 17 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Tansey, Christine, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 Hope Street

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2018

Transaction ID : SA12.33794.8

Amount of Each Receipt this Period
2500.00

Memo Item
ActBlue

B. Kohlenberg, Andrew, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 235

City Westport	State MA	Zip Code 02791
------------------	-------------	-------------------

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

Name of Employer (for Individual) Howland Evangelista Kohlenber	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2018

Transaction ID : SA12.33794.9

Amount of Each Receipt this Period
300.00

Memo Item
ActBlue

C. Dangremond, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 193 Summit View Lane

City North Kingstown	State RI	Zip Code 02852
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Independent Director
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2018

Transaction ID : SA12.33794.10

Amount of Each Receipt this Period
5000.00

Memo Item
ActBlue

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: (check only one)	PAGE 18 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Weizenbaum, Miriam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 North Main Street
 City Providence State RI Zip Code 02903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DeLuca & Weizenbaum Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA12.33794.11
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

B. Sloane, Barry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Mystic Avenue
 City Medford State MA Zip Code 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Century Bank Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA12.33794.12
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

C. Farmer, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 Benefit Street
 City Providence State RI Zip Code 02903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2018
Transaction ID : SA12.33794.13
 Amount of Each Receipt this Period 250.00
 Memo Item
 ActBlue

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: (check only one)	PAGE 19 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Lee, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 Angell Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eugene Lee Inc. Occupation (for Individual) Design Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA12.33794.14
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

B. Squibb, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 Benefit Street
 City Providence State RI Zip Code 02903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Granny Squibb Company Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA12.33794.15
 Amount of Each Receipt this Period 50.00
 Memo Item
 ActBlue

C. Burns, J.Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 Fogland Road
 City Tiverton State RI Zip Code 02878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brown Rudnick Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA12.33794.16
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

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: (check only one)	PAGE 20 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Stephens, Erich, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Exeter Street
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vineyard Wind LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2018
Transaction ID : SA12.33794.17
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

B. Nordstrom, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 Blackstone Boulevard
 City Providence State RI Zip Code 02906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M Financial Group Occupation (for Individual) Insurance Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA12.33794.18
 Amount of Each Receipt this Period 250.00
 Memo Item
 ActBlue

C. Boudreau, Andre, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 756
 City Block Island State RI Zip Code 02807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Construction
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA12.33794.19
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ActBlue

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: (check only one)	PAGE 21 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Biggs, Gretchen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Fenway Road
 City Westerly State RI Zip Code 02891
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 28 / 2018**
Transaction ID : SA12.33794.20
 Amount of Each Receipt this Period 500.00
 Memo Item ActBlue

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 382110
 City Cambridge State MA Zip Code 02238
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 100981.07

Date of Receipt **10 / 12 / 2018**
Transaction ID : SA12.33798
 Amount of Each Receipt this Period 3861.20
 Memo Item Transfer

C. Morse, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 833 Hartford Avenue
 City Johnston State RI Zip Code 02919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Law Offices of Mark Morse Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 01 / 2018**
Transaction ID : SA12.33798.0
 Amount of Each Receipt this Period 500.00
 Memo Item ActBlue

SUBTOTAL of Receipts This Page (optional).....	3861.20
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: (check only one)	PAGE 22 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Paolino, Joseph, , , Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Westminster Street

City Providence	State RI	Zip Code 02903
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Paolino Properties	Occupation (for Individual) Managing Partner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

Transaction ID : SA12.33798.1

Amount of Each Receipt this Period
2500.00

Memo Item
ActBlue

B. Anderson, Kimberly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 Adams Point Road

City Barrington	State RI	Zip Code 02806
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Ava Anderson LLC	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

Transaction ID : SA12.33798.2

Amount of Each Receipt this Period
1000.00

Memo Item
ActBlue

C. Einig, Lynne, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 335 Frenchtown Road

City East Greenwich	State RI	Zip Code 02818
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2018

Transaction ID : SA12.33798.3

Amount of Each Receipt this Period
20.00

Memo Item
ActBlue

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: (check only one)	PAGE 23 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Rhode Island Victory Fund 2018
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 124 Washington Street
Suite 101
City Foxboro State MA Zip Code 02035
FEC ID number of contributing federal political committee. **C** C00629907
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 157500.00

Date of Receipt 10 / 09 / 2018
Transaction ID : SA12.33791
Amount of Each Receipt this Period 12500.00
 Memo Item
Joint Fundraiser Proceeds

B. Ferenbach, Carl, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2 Commonwealth Avenue
City Boston State MA Zip Code 02116
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
High Meadows Foundation Chairman
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 9900.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA12.33791.0
Amount of Each Receipt this Period 9900.00
 Memo Item
Victory Fund

C. END CITIZENS UNITED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 66005
City WASHINGTON State DC Zip Code 20035
FEC ID number of contributing federal political committee. **C** C00573261
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA12.33791.1
Amount of Each Receipt this Period 2500.00
 Memo Item
Victory Fund

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: (check only one)	PAGE 24 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. WHITEHOUSE FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410803

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

Transaction ID : SA12.33728

Amount of Each Receipt this Period
28750.00

Memo Item
Transfer

B. WHITEHOUSE FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
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FEC ID number of contributing federal political committee. **C** C00410803

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
57500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2018

Transaction ID : SA12.33727

Amount of Each Receipt this Period
28750.00

Memo Item
Transfer

C. WHITEHOUSE FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410803

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
117500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA12.33718

Amount of Each Receipt this Period
60000.00

Memo Item
Transfer

SUBTOTAL of Receipts This Page (optional).....	117500.00
TOTAL This Period (last page this line number only).....	163444.58

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address One Citizens Plaza

City Providence State RI Zip Code 02903

Purpose of Disbursement
Checkbook Supplies

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33641
Amount of Each Disbursement this Period
895.18

Memo Item

Full Name (Last, First, Middle Initial)

B. Connie Grosch Photography

Mailing Address 20 Freese Street

City Providence State RI Zip Code 02908

Purpose of Disbursement
Photography Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33744
Amount of Each Disbursement this Period
415.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Division of Taxation

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement
State Payroll Taxes

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33642
Amount of Each Disbursement this Period
83.05

Memo Item

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

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

1393.23

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Fay, Carol, , ,

Mailing Address 184 University Avenue

City Providence State RI Zip Code 02906

Purpose of Disbursement Interpreting Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33738
 Amount of Each Disbursement this Period
 210.00

Memo Item

Full Name (Last, First, Middle Initial)

B. High Output Inc

Mailing Address 495 Turnpike Street

City Canton State MA Zip Code 02021

Purpose of Disbursement Production Equipment

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33736
 Amount of Each Disbursement this Period
 15837.04

Memo Item

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement Federal Payroll Taxes

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33643
 Amount of Each Disbursement this Period
 745.40

Memo Item

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

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

16792.44

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Olasanoye, Tolulope Kevin, , ,

Mailing Address 394 Plainfield Street

City Providence State RI Zip Code 02909

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.33644**
Amount of Each Disbursement this Period
2368.05

Memo Item

Full Name (Last, First, Middle Initial)

B. Rhode Island Convention Center

Mailing Address One Sabin Street

City Providence State RI Zip Code 02903

Purpose of Disbursement Catering Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.33745**
Amount of Each Disbursement this Period
1960.89

Memo Item

Full Name (Last, First, Middle Initial)

C. Sentinel Limousine

Mailing Address 11 Clemenceau Street

City East Providence State RI Zip Code 02914

Purpose of Disbursement Transportation Rental

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.33733**
Amount of Each Disbursement this Period
487.50

Memo Item

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

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

4816.44

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Sentinel Limousine

Mailing Address 11 Clemenceau Street

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Transportation Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33735
Amount of Each Disbursement this Period
487.50

Memo Item

Full Name (Last, First, Middle Initial)

B. West, Christine, , ,

Mailing Address 16 Kathleen Drive

City Westerly State RI Zip Code 02891

Purpose of Disbursement
Interpreting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.33742
Amount of Each Disbursement this Period
280.59

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

768.09

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

23770.20

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Alonzo, Elvira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C
Transaction ID : SB30B.33466
Amount of Each Disbursement this Period: 223.20

Memo Item

B. Alonzo, Elvira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 08 / 2018

FEC Identification Number: C
Transaction ID : SB30B.33498
Amount of Each Disbursement this Period: 389.55

Memo Item

C. Alonzo, Elvira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 16 / 2018

FEC Identification Number: C
Transaction ID : SB30B.33557
Amount of Each Disbursement this Period: 237.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 849.75

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Andruet, Bastien, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 15 Pine Hill Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33645 Amount of Each Disbursement this Period 1205.00	
City No Scituate	State RI	Zip Code 02857	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Anziani, Cinthia, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 31 Burnett Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33494 Amount of Each Disbursement this Period 159.00	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Anziani, Cinthia, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 31 Burnett Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33568 Amount of Each Disbursement this Period 62.70	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1426.70
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. A T & T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement
Phones and Service

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2018

FEC Identification Number

C
Transaction ID : SB30B.33646
Amount of Each Disbursement this Period
192.57

Memo Item

Full Name (Last, First, Middle Initial)

B. Bauerle, Brenton, , ,

Mailing Address 207 Pinecrest Drive

City No Kingstown State RI Zip Code 02852

Purpose of Disbursement
Net Wages

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB30B.33647
Amount of Each Disbursement this Period
1205.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bouchard Gold Communications

Mailing Address 5900 Balcones Drive

City Austin State TX Zip Code 78731

Purpose of Disbursement
Printing Exempt Mail

Candidate Name
WHITEHOUSE, SHELDON II, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: RI District: 00

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C S6RI00221
Transaction ID : SB30B.33795
Amount of Each Disbursement this Period
43537.00

Memo Item

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

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

44934.57

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Bourdeau, Moise, , ,		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 296 Greenwood Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33715 Amount of Each Disbursement this Period [REDACTED] 268.46	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. HealthSource RI		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address PO Box 9711		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33715 Amount of Each Disbursement this Period [REDACTED] 268.46	
City Providence	State RI	Zip Code 02940	Category/ Type [REDACTED]
Purpose of Disbursement Health Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Bourdeau, Moise, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 296 Greenwood Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33648 Amount of Each Disbursement this Period [REDACTED] 1229.44	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1497.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Boyd, Jameson, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33460 Amount of Each Disbursement this Period [REDACTED] 323.55	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Boyd, Jameson, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33502 Amount of Each Disbursement this Period [REDACTED] 556.80	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Boyd, Jameson, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33551 Amount of Each Disbursement this Period [REDACTED] 352.95	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1233.30
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Bramblet, Sarah, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16 Anthony Street

City Johnston State RI Zip Code 02919

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33649

Amount of Each Disbursement this Period: 1205.00

Memo Item

B. Cabrega, Josefina, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 Woodbine Street

City Cranston State RI Zip Code 02910

Purpose of Disbursement Canvass Stipend

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33454

Amount of Each Disbursement this Period: 495.75

Memo Item

C. Cabrega, Josefina, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 Woodbine Street

City Cranston State RI Zip Code 02910

Purpose of Disbursement Canvass Stipend

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33506

Amount of Each Disbursement this Period: 524.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2225.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Cabrega, Josefina, , ,

Mailing Address 30 Woodbine Street

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33547
Amount of Each Disbursement this Period

[REDACTED] 425.25

Memo Item

Full Name (Last, First, Middle Initial)

B. Caicedo, Jonathan, , ,

Mailing Address 72 Marshall Street

City
Providence

State
RI

Zip Code
02909

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33458
Amount of Each Disbursement this Period

[REDACTED] 225.45

Memo Item

Full Name (Last, First, Middle Initial)

C. Caicedo, Jonathan, , ,

Mailing Address 72 Marshall Street

City
Providence

State
RI

Zip Code
02909

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33503
Amount of Each Disbursement this Period

[REDACTED] 187.80

Memo Item

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

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

[REDACTED] 838.50

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Catone, Reinaldo, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 37 Homer Street		FEC Identification Number C [] Transaction ID : SB30B.33516 Amount of Each Disbursement this Period [] 598.80	
City Providence	State RI	Zip Code 02907	Category/ Type []
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Catone, Reinaldo, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 37 Homer Street		FEC Identification Number C [] Transaction ID : SB30B.33553 Amount of Each Disbursement this Period [] 281.70	
City Providence	State RI	Zip Code 02907	Category/ Type []
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Cifuentes, Melissa, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 29 Galileo Avenue		FEC Identification Number C [] Transaction ID : SB30B.3365t Amount of Each Disbursement this Period [] 282.69	
City Providence	State RI	Zip Code 02909	Category/ Type []
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1163.19
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Corti, James, , , Jr.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 50 Tamarack Trail		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33651 Amount of Each Disbursement this Period 1490.40	
City Stockholm	State NJ	Zip Code 07460	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Davis, Erika, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 468 Wickenden Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33577 Amount of Each Disbursement this Period 435.30	
City Providence	State RI	Zip Code 02903	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Division of Taxation		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address One Capitol Hill		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33652 Amount of Each Disbursement this Period 2151.03	
City Providence	State RI	Zip Code 02908	Category/ Type
Purpose of Disbursement State Payroll Taxes			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

4076.73

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Dooley, Jesse, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 112 Lexington Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33653 Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Fales, Connor, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 3 Lowell Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33686 Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Taunton	State MA	Zip Code 02760	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Familia, Rosemeri, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 62 Kossuth Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33517 Amount of Each Disbursement this Period [REDACTED] 219.75	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2629.75
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Familia, Rosemeri, , ,

Mailing Address 62 Kossuth Street

City
Providence

State
RI

Zip Code
02909

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C [Redacted]

Transaction ID : SB30B.33564

Amount of Each Disbursement this Period

[Redacted] 166.05

Memo Item

Full Name (Last, First, Middle Initial)

B. Fenzl, Jake, , ,

Mailing Address 2206 Teardrop Avenue

City
Columbus

State
OH

Zip Code
43235

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C [Redacted]

Transaction ID : SB30B.33654

Amount of Each Disbursement this Period

[Redacted] 1490.40

Memo Item

Full Name (Last, First, Middle Initial)

C. Fleming, Daisy, , ,

Mailing Address 29 Rovensky Avenue

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C [Redacted]

Transaction ID : SB30B.33655

Amount of Each Disbursement this Period

[Redacted] 1157.12

Memo Item

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

[Redacted] 2813.57

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

[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Flores, Kimberly, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 62 Aldine Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33656 Amount of Each Disbursement this Period [REDACTED] 658.97	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Folcarelli, David, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 201 Broadway		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33657 Amount of Each Disbursement this Period [REDACTED] 1182.44	
City Providence	State RI	Zip Code 02903	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Fox, Kristina, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 12 Wolf Hill Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33722 Amount of Each Disbursement this Period [REDACTED] 876.12	
City Smithfield	State RI	Zip Code 02917	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2717.53
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Fuller, Austin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 80 Orleton Court

City Cheshire State CT Zip Code 06410

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33658

Amount of Each Disbursement this Period: 1543.60

Memo Item

B. Glad, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24 Blodgett Avenue

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33659

Amount of Each Disbursement this Period: 1157.12

Memo Item

C. Grande, Andrew, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3731

City Cranston State RI Zip Code 02910

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.3366t

Amount of Each Disbursement this Period: 1543.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4244.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Griffin, Patrick, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 4640 Post Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33661 Amount of Each Disbursement this Period 1157.12	
City East Greenwich	State RI	Zip Code 02821	Category/ Type
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Harrison, Roxanne, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 384 Potters Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33474 Amount of Each Disbursement this Period 132.00	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. HealthSource RI		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address PO Box 9711		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33662 Amount of Each Disbursement this Period 3714.76	
City Providence	State RI	Zip Code 02940	Category/ Type
Purpose of Disbursement Health Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	5003.88
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Heredia, Yojaida, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 50 Rowan Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33663 Amount of Each Disbursement this Period [REDACTED] 421.19	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Hernandez, Juana, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 95 Alexander St.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33526 Amount of Each Disbursement this Period [REDACTED] 412.50	
City North Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Hernandez, Juana, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 95 Alexander St.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33552 Amount of Each Disbursement this Period [REDACTED] 292.20	
City North Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1125.89
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Hofman, Robert, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 951 County Road 27		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33664 Amount of Each Disbursement this Period 1182.44	
City Oxford	State NY	Zip Code 13830	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Hustle		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 343 Sansome Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33789 Amount of Each Disbursement this Period 207.19	
City San Francisco	State CA	Zip Code 94104	Category/ Type
Purpose of Disbursement Messaging Platform			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address PO Box 660351		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33665 Amount of Each Disbursement this Period 25653.94	
City Dallas	State TX	Zip Code 75266	Category/ Type
Purpose of Disbursement Federal Payroll Taxes			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	27043.57
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Ivonnet, Gilma, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 1048 Cranston		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33462 Amount of Each Disbursement this Period [REDACTED] 256.05	
City Cranston	State RI	Zip Code 02920	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Ivonnet, Gilma, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 1048 Cranston		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33501 Amount of Each Disbursement this Period [REDACTED] 599.70	
City Cranston	State RI	Zip Code 02920	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Jaime, Marianela, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 100 Indiana Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33511 Amount of Each Disbursement this Period [REDACTED] 284.70	
City Providence	State RI	Zip Code 02905	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1140.45
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Jaime, Marianela, , ,

Mailing Address 100 Indiana Avenue

City Providence State RI Zip Code 02905

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33570
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Joharjian, Alina, , ,

Mailing Address 6 Merit Drive

City Cranston State RI Zip Code 02920

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33666
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Jorge, Edwin, , ,

Mailing Address 145 Metropolitan Road

City Providence State RI Zip Code 02908

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33533
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Jorge, Edwin, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 145 Metropolitan Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33561 Amount of Each Disbursement this Period [REDACTED] 211.80	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Jorge, Leslie, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 145 Metropolitan Rd		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33667 Amount of Each Disbursement this Period [REDACTED] 620.98	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Kreger, Charlotte, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 9 Amy Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33668 Amount of Each Disbursement this Period [REDACTED] 1157.12	
City Providence	State RI	Zip Code 02906	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1989.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Lomazzo, Marco, , ,

Mailing Address 131 Moore Street

City
Providence

State
RI

Zip Code
02907

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.33521
Amount of Each Disbursement this Period
[Redacted] 434.70

Memo Item

Full Name (Last, First, Middle Initial)

B. Lomazzo, Marco, , ,

Mailing Address 131 Moore Street

City
Providence

State
RI

Zip Code
02907

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.33563
Amount of Each Disbursement this Period
[Redacted] 179.55

Memo Item

Full Name (Last, First, Middle Initial)

C. London, Jake, , ,

Mailing Address 55 Bradford Street

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.33671
Amount of Each Disbursement this Period
[Redacted] 2111.12

Memo Item

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

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

[Redacted]	2725.37
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[Redacted]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Lopez, Erminia Garcia, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 201 Congress Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33464 Amount of Each Disbursement this Period [REDACTED] 226.20	
City Providence	State RI	Zip Code 02905	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) B. Lopez, Erminia Garcia, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 201 Congress Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33499 Amount of Each Disbursement this Period [REDACTED] 582.45	
City Providence	State RI	Zip Code 02905	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) C. Lopez, Erminia Garcia, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 201 Congress Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33548 Amount of Each Disbursement this Period [REDACTED] 414.75	
City Providence	State RI	Zip Code 02905	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1223.40
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Lysik, Matthew, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 147 Oakwoods Drive		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33669 Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Wakefield	State RI	Zip Code 02879	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Machado Arabi, Yanet, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33520 Amount of Each Disbursement this Period [REDACTED] 415.50	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Machado Arabi, Yanet, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33545 Amount of Each Disbursement this Period [REDACTED] 393.30	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2013.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Maria, Kenia, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 22 Spooner Street		FEC Identification Number C [] Transaction ID : SB30B.33559 Amount of Each Disbursement this Period [] 225.00	
City Providence	State RI	Zip Code 02907	Category/ Type []
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Mariano, Dorko, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 394 Blackstone Street		FEC Identification Number C [] Transaction ID : SB30B.33531 Amount of Each Disbursement this Period [] 337.50	
City Providence	State RI	Zip Code 02907	Category/ Type []
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Mariano, Dorko, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 394 Blackstone Street		FEC Identification Number C [] Transaction ID : SB30B.33561 Amount of Each Disbursement this Period [] 144.30	
City Providence	State RI	Zip Code 02907	Category/ Type []
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 706.80
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Martinez, Amalia, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 163 Laurel Hill Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33490 Amount of Each Disbursement this Period [REDACTED] 56.55	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Martinez, Carlos, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 243 Smith St.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33525 Amount of Each Disbursement this Period [REDACTED] 371.55	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. McCadden, Collin, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 154 Riverdell Drive		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33671 Amount of Each Disbursement this Period [REDACTED] 1157.12	
City Saunderstown	State RI	Zip Code 02874	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1585.22
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Mullaney, Daniel, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 50 Hamilton Drive		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33579 Amount of Each Disbursement this Period [REDACTED] 384.00	
City East Greenwich	State RI	Zip Code 02818	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Nehiley, Nicole, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 137 Armstrong Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33672 Amount of Each Disbursement this Period [REDACTED] 1424.61	
City Warwick	State RI	Zip Code 02889	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Ortiz, Edwin, J, ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 38 Mt. Pleasant Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33468 Amount of Each Disbursement this Period [REDACTED] 299.70	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2108.31
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Ortiz, Edwin, J, ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 38 Mt. Pleasant Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33497 Amount of Each Disbursement this Period [REDACTED] 178.05	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) B. Ortiz, Edwin, J, ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 38 Mt. Pleasant Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33555 Amount of Each Disbursement this Period [REDACTED] 260.70	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) C. Park, Sam, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 4325 Lowvorn Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33673 Amount of Each Disbursement this Period [REDACTED] 633.62	
City Carrllton	State GA	Zip Code 30117	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1072.37
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Perdomo, David, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 28 Privet		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33495 Amount of Each Disbursement this Period [REDACTED] 124.20	
City Pawtucket	State RI	Zip Code 02860	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Perez, Jose, F., ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33456 Amount of Each Disbursement this Period [REDACTED] 250.95	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Perez, Jose, F., ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33505 Amount of Each Disbursement this Period [REDACTED] 566.55	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

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

[REDACTED] 941.70
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Perez, Jose, F., ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33546 Amount of Each Disbursement this Period [REDACTED] 519.30	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) B. Perez, Liseth, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 67 Salmon Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33558 Amount of Each Disbursement this Period [REDACTED] 232.20	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) C. Perez, Mercedes, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33438 Amount of Each Disbursement this Period [REDACTED] 228.30	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 979.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Perez, Mercedes, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33512 Amount of Each Disbursement this Period [REDACTED] 457.20	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Perez, Mercedes, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33556 Amount of Each Disbursement this Period [REDACTED] 259.95	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. PhoneBurrner Inc		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018	
Mailing Address 1968 S. Coast Highway		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33691 Amount of Each Disbursement this Period [REDACTED] 307.00	
City Laguna Beach	State CA	Zip Code 92651	Category/ Type [REDACTED]
Purpose of Disbursement Subscription		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1024.15
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. PhoneBurrner Inc

Date of Disbursement: / /

Mailing Address: 1968 S. Coast Highway

City: Laguna Beach State: CA Zip Code: 92651

Purpose of Disbursement: Subscription

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB30B.33724
Amount of Each Disbursement this Period:

Memo Item

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

Date of Disbursement: / /

Mailing Address: Turnkey Station

City: Providence State: RI Zip Code: 02940

Purpose of Disbursement: Postage Exempt Mail

Candidate Name: **WHITEHOUSE, SHELDON II, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: RI District: 00

FEC Identification Number: **C** S6R100221
Transaction ID : SB30B.33800
Amount of Each Disbursement this Period:

Memo Item

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

Date of Disbursement: / /

Mailing Address: 324 Newman Avenue

City: Rumford State: RI Zip Code: 02916

Purpose of Disbursement: Canvass Stipend

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB30B.33493
Amount of Each Disbursement this Period:

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Rego, Charles, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 324 Newman Avenue		FEC Identification Number C [] Transaction ID : SB30B.33551 Amount of Each Disbursement this Period [] 318.45	
City Rumford	State RI	Zip Code 02916	Category/ Type []
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Rego, Matthew, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 324 Newman Avenue		FEC Identification Number C [] Transaction ID : SB30B.33674 Amount of Each Disbursement this Period [] 1543.60	
City Rumford	State RI	Zip Code 02916	Category/ Type []
Purpose of Disbursement Net Wages		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Rhau, Michelle, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 384 Union Avenue		FEC Identification Number C [] Transaction ID : SB30B.33676 Amount of Each Disbursement this Period [] 1205.00	
City Cranston	State RI	Zip Code 02909	Category/ Type []
Purpose of Disbursement Net Wages		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

[] 3067.05

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Rodriguez Chaple, Barbaro, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33481 Amount of Each Disbursement this Period [REDACTED] 288.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) B. Rodriguez Chaple, Barbaro, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33492 Amount of Each Disbursement this Period [REDACTED] 591.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) C. Rodriguez Chaple, Barbaro, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33544 Amount of Each Disbursement this Period [REDACTED] 579.75	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1459.65
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Rodriuez Guzman, Amarilis, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 383 Blackstone Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33491 Amount of Each Disbursement this Period [REDACTED] 122.25	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) B. Rodriuez Guzman, Amarilis, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 383 Blackstone Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33567 Amount of Each Disbursement this Period [REDACTED] 72.00	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) C. Sanchez, Lesbia, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33448 Amount of Each Disbursement this Period [REDACTED] 322.20	
City Providence	State RI	Zip Code 02909	Category/ Type 001
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 516.45
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sanchez, Lesbia, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33522	
City Providence	State RI	Zip Code 02909	Amount of Each Disbursement this Period [REDACTED] 412.20
Purpose of Disbursement Canvass Stipend		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sanchez, Lesbia, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33560	
City Providence	State RI	Zip Code 02909	Amount of Each Disbursement this Period [REDACTED] 212.55
Purpose of Disbursement Canvass Stipend		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Sanchez, Mercy, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.3343f	
City Providence	State RI	Zip Code 02907	Amount of Each Disbursement this Period [REDACTED] 302.25
Purpose of Disbursement Canvass Stipend		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 927.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sanchez, Mercy, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33513 Amount of Each Disbursement this Period [REDACTED] 337.95	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Sanchez, Mercy, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33562 Amount of Each Disbursement this Period [REDACTED] 202.50	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Santana, Maria, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 60 Netop Drive		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33581 Amount of Each Disbursement this Period [REDACTED] 239.55	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

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

[REDACTED] 780.00
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Schein, Michelle, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 500 Old North Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33675 Amount of Each Disbursement this Period 1157.12	
City South Kingston	State RI	Zip Code 02881	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Schwartzman, Jesse, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 360 Oak Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33685 Amount of Each Disbursement this Period 1205.00	
City Ridgewood	State NJ	Zip Code 07450	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Shea, Dillon, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 14 Harvest Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33465 Amount of Each Disbursement this Period 246.00	
City Providence	State RI	Zip Code 02908	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2608.12
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Shea, Dillon, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 14 Harvest Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33496 Amount of Each Disbursement this Period [REDACTED] 326.70	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Shea, Dillon, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 14 Harvest Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33554 Amount of Each Disbursement this Period [REDACTED] 278.25	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Shell		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018	
Mailing Address 1075 North Main Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33677 Amount of Each Disbursement this Period [REDACTED] 1725.00	
City Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Gas Cards		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2329.95
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Spoken Hub LLC

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement
Dialing Minutes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33678
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Spoken Hub LLC

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement
Dialing Minutes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33858
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Spoken Hub LLC

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement
Dialing Minutes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.33678
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sridhar, Keshavan, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 290 Basil Avenue		FEC Identification Number C [] Transaction ID : SB30B.33680 Amount of Each Disbursement this Period [] 1817.83	
City Morgan Hill	State LA	Zip Code 95037	Category/ Type []
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Thomas, Jennifer, , ,		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 213 Medway St Apt 5A		FEC Identification Number C [] Transaction ID : SB30B.33714 Amount of Each Disbursement this Period [] 318.89	
City Providence	State RI	Zip Code 02906	Category/ Type []
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. HealthSource RI		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address PO Box 9711		FEC Identification Number C [] Transaction ID : SB30B.33714 Amount of Each Disbursement this Period [] 318.89	
City Providence	State RI	Zip Code 02940	Category/ Type []
Purpose of Disbursement Health Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2136.72
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Thomas, Jennifer, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 213 Medway St Apt 5A		FEC Identification Number C Transaction ID : SB30B.33681 Amount of Each Disbursement this Period 2035.17
City Providence	State RI	
Purpose of Disbursement Net Wages	Zip Code 02906	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Valerio, Manuel, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018
Mailing Address 219A Early Street		FEC Identification Number C Transaction ID : SB30B.33509 Amount of Each Disbursement this Period 205.80
City Providence	State RI	
Purpose of Disbursement Canvass Stipend	Zip Code 02907	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Valerio, Manuel, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address 219A Early Street		FEC Identification Number C Transaction ID : SB30B.33566 Amount of Each Disbursement this Period 56.70
City Providence	State RI	
Purpose of Disbursement Canvass Stipend	Zip Code 02907	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2297.67
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Valerio, Milagros, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33515 Amount of Each Disbursement this Period [REDACTED] 415.80	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Valerio, Milagros, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33566 Amount of Each Disbursement this Period [REDACTED] 141.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Vasquez, Annisha, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 342 Veazie Street		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33682 Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1762.25
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Wagnac, Josue, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 14 Eliot Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33683 Amount of Each Disbursement this Period [REDACTED] 633.62	
City No Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Waithe, Justine, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33508 Amount of Each Disbursement this Period [REDACTED] 178.20	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Waithe, Justine, , ,		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] Transaction ID : SB30B.33577 Amount of Each Disbursement this Period [REDACTED] 23.70	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 835.52
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Woischke, Alynn, , ,

Mailing Address 57 Nicholas Brown Yard

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : SB30B.33684

Amount of Each Disbursement this Period

2852.54

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

2852.54

165320.99

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/9.5183**
Rhode Island Democratic State Committee

LOAN SOURCE Full Name (Last, First, Middle Initial) Licht 88 Committee			<input checked="" type="checkbox"/> Memo Item	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 5249.87	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5249.87
------------------------------------	------------------------------------	--

TERMS

Date Incurred MM / DD / YYYY 12 / 31 / 1988	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	[] 5249.87
TOTALS This Period (last page in this line only)	▶	[] 5249.87

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 73 OF 114
	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 WHITEHOUSE, SHELDON II, , ,			Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address PO BOX 40280			
City PROVIDENCE	State RI	Zip Code 02940	

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	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	4.60

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 02 / 2018	29207.62

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	29207.62
	Transaction ID : H3.33856
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 05 / 2018	19621.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	19621.32
Transaction ID : H3.33857	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 12 / 2018	1000.19

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1000.19
Transaction ID : H3.33862	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a)	
b)	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a)	
b)	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	49829.13
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).....	49829.13

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

Form A: Organizer. Transaction ID: H4.33624. Mailing Address: 1118 Howard Street, San Francisco, CA 94103. Purpose: Software. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 399851.16. Date: 10/01/2018. Summary: FEDERAL SHARE 15.75, NONFEDERAL SHARE 59.25, TOTAL AMOUNT 75.00.

Form B: Amazon.com. Transaction ID: H4.33585. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 399941.76. Date: 10/03/2018. Summary: FEDERAL SHARE 19.03, NONFEDERAL SHARE 71.57, TOTAL AMOUNT 90.60.

Form C: Amazon.com. Transaction ID: H4.33586. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 402865.86. Date: 10/04/2018. Summary: FEDERAL SHARE 614.07, NONFEDERAL SHARE 2310.03, TOTAL AMOUNT 2924.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 648.85, 2440.85, 3089.70.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33587
Amazon.com
Mailing Address 1516 Second Avenue
City Seattle State WA Zip Code 98144
Purpose of Disbursement: Committee Supplies
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 403065.88
Date 10 / 04 / 2018
FEDERAL SHARE 42.01 + NONFEDERAL SHARE 158.01 = TOTAL AMOUNT 200.02

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33603
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet Cable Phones
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 403767.95
Date 10 / 04 / 2018
FEDERAL SHARE 147.44 + NONFEDERAL SHARE 554.63 = TOTAL AMOUNT 702.07

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33604
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 403835.03
Date 10 / 04 / 2018
FEDERAL SHARE 14.09 + NONFEDERAL SHARE 52.99 = TOTAL AMOUNT 67.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 203.54 + NONFEDERAL SHARE 765.63 = TOTAL AMOUNT 969.17

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33611 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Domino's Pizza Mailing Address 877 North Main Street			Allocated Activity or Event Year-To-Date 403928.76			
City Providence	State RI	Zip Code 02906	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 403928.76			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="19.69"/>			<input type="text" value="74.04"/>			<input type="text" value="93.73"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33621 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
M.P. Cleaning Services Mailing Address 60 Aberdeen Avenue			Allocated Activity or Event Year-To-Date 404148.76			
City Warwick	State RI	Zip Code 02888	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Office Maintenance		<input type="text"/>	Allocated Activity or Event Year-To-Date 404148.76			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="46.20"/>			<input type="text" value="173.80"/>			<input type="text" value="220.00"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33688 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Albaran, Orfilia, , , Mailing Address 50 Highland Street			Allocated Activity or Event Year-To-Date 404368.76			
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Office Maintenance		<input type="text"/>	Allocated Activity or Event Year-To-Date 404368.76			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="46.20"/>			<input type="text" value="173.80"/>			<input type="text" value="220.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="112.09"/>		<input type="text" value="421.64"/>		<input type="text" value="533.73"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.33690. Memo Item. Allocated Activity or Event: Administrative. Mailing Address 45 Saw Mill Drive. City No Kingstown, State RI, Zip Code 02852. Purpose of Disbursement: Reimbursement. Activity or Event Identifier: Administrative. Allocated Activity or Event Year-To-Date: 404574.27. Date: 10/04/2018. FEDERAL SHARE: 43.17, NONFEDERAL SHARE: 162.34, TOTAL AMOUNT: 205.51.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.33729. Memo Item. Allocated Activity or Event: Administrative. Mailing Address 551 North Main Street. City Providence, State RI, Zip Code 02906. Purpose of Disbursement: Meeting Printing. Activity or Event Identifier: Administrative. Allocated Activity or Event Year-To-Date: 0.00. Date: 09/20/2018. FEDERAL SHARE: 6.11, NONFEDERAL SHARE: 22.94, TOTAL AMOUNT: 29.05.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.33730. Memo Item. Allocated Activity or Event: Administrative. Mailing Address 1370 Mineral Spring Avenue. City North Providence, State RI, Zip Code 02904. Purpose of Disbursement: Meeting Refreshments. Activity or Event Identifier: Administrative. Allocated Activity or Event Year-To-Date: 0.00. Date: 09/20/2018. FEDERAL SHARE: 37.06, NONFEDERAL SHARE: 139.40, TOTAL AMOUNT: 176.46.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 43.17, 162.34, 205.51.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: 52A Valley LLC. Transaction ID: H4.33746. Administrative. Date: 10/04/2018. Total Amount: 2000.00.

Form B: Pizza Queen. Transaction ID: H4.33859. Administrative. Date: 10/04/2018. Total Amount: 40.56.

Form C: Amazon.com. Transaction ID: H4.33588. Administrative. Date: 10/05/2018. Total Amount: 27.54.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (434.31), NONFEDERAL SHARE (1633.79), TOTAL AMOUNT (2068.10).

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Domino's Pizza. Transaction ID: H4.33612. Mailing Address: 877 North Main Street, Providence, RI 02906. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 406671.35. Date: 10/05/2018. Summary: FEDERAL SHARE 6.09, NONFEDERAL SHARE 22.89, TOTAL AMOUNT 28.98.

Form B: Amazon.com. Transaction ID: H4.33589. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 406906.14. Date: 10/09/2018. Summary: FEDERAL SHARE 49.31, NONFEDERAL SHARE 185.48, TOTAL AMOUNT 234.79.

Form C: Amazon.com. Transaction ID: H4.33590. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 407156.12. Date: 10/09/2018. Summary: FEDERAL SHARE 52.58, NONFEDERAL SHARE 197.40, TOTAL AMOUNT 249.98.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 107.98, 405.77, 513.75.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33591 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Amazon.com Mailing Address 1516 Second Avenue			Allocated Activity or Event Year-To-Date 407188.31			
City Seattle	State WA	Zip Code 98144	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 407188.31			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="6.76"/>			<input type="text" value="25.43"/>			<input type="text" value="32.19"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33693 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Walmart Mailing Address 551 Silver Spring Street			Allocated Activity or Event Year-To-Date 407354.72			
City Providence	State RI	Zip Code 02904	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 407354.72			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="34.95"/>			<input type="text" value="131.46"/>			<input type="text" value="166.41"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33861 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Amazon.com Mailing Address 1516 Second Avenue			Allocated Activity or Event Year-To-Date 407389.71			
City Seattle	State WA	Zip Code 98144	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 407389.71			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="7.35"/>			<input type="text" value="27.64"/>			<input type="text" value="34.99"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="49.06"/>		<input type="text" value="184.53"/>		<input type="text" value="233.59"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33605 Memo Item

Cox Communications

Mailing Address PO Box 78000

City Detroit State MI Zip Code 48278

Purpose of Disbursement: Internet Cable Phones

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 407661.05

Date 10 / 10 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.99		214.35		271.34

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33694 Memo Item

Lowe's Home Center

Mailing Address 555 Greenwich Avenue

City Warwick State RI Zip Code 02886

Purpose of Disbursement: Committee Supplies

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 407901.33

Date 10 / 10 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.46		189.82		240.28

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33760 Memo Item

Expedition Strategies

Mailing Address 2010 N. Roosevelt Street

City Arlington State VA Zip Code 22205

Purpose of Disbursement: Issues Research

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 428361.33

Date 10 / 10 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4296.60		16163.40		20460.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4404.05		16567.57		20971.62

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33613 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Domino's Pizza Mailing Address 877 North Main Street			Allocated Activity or Event Year-To-Date 428424.80			
City Providence	State RI	Zip Code 02906	Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 428424.80			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="13.33"/>			<input type="text" value="50.14"/>			<input type="text" value="63.47"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33632 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Staples Mailing Address 551 North Main Street			Allocated Activity or Event Year-To-Date 429038.68			
City Providence	State RI	Zip Code 02906	Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 429038.68			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="128.92"/>			<input type="text" value="484.96"/>			<input type="text" value="613.88"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33633 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
The Sandwich Hut Mailing Address 1253 North Main Street			Allocated Activity or Event Year-To-Date 429241.72			
City Providence	State RI	Zip Code 02904	Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 429241.72			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="42.64"/>			<input type="text" value="160.40"/>			<input type="text" value="203.04"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="184.89"/>		<input type="text" value="695.50"/>		<input type="text" value="880.39"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Southwest Airlines. Transaction ID: H4.33635. Mailing Address: Theodore Francis Green Airport. City: Warwick, State: RI, Zip Code: 02886. Purpose: Airfare. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 429885.52. Date: 10/11/2018. Summary: FEDERAL SHARE 135.20 + NONFEDERAL SHARE 508.60 = TOTAL AMOUNT 643.80

Form B: Southwest Airlines. Transaction ID: H4.33636. Mailing Address: Theodore Francis Green Airport. City: Warwick, State: RI, Zip Code: 02886. Purpose: Airfare. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 430529.32. Date: 10/11/2018. Summary: FEDERAL SHARE 135.20 + NONFEDERAL SHARE 508.60 = TOTAL AMOUNT 643.80

Form C: Antonio's Newport. Transaction ID: H4.33600. Mailing Address: 150 Connell Highway. City: Newport, State: RI, Zip Code: 02840. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 430560.78. Date: 10/12/2018. Summary: FEDERAL SHARE 6.61 + NONFEDERAL SHARE 24.85 = TOTAL AMOUNT 31.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 277.01, 1042.05, 1319.06

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33602
Clinton Street Partners
Mailing Address PO Box 2516
City Fall River State MA Zip Code 02722
Purpose of Disbursement: Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 431960.78
Date 10 / 12 / 2018
FEDERAL SHARE 294.00 + NONFEDERAL SHARE 1106.00 = TOTAL AMOUNT 1400.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33606
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet Cable Phones
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 432890.94
Date 10 / 12 / 2018
FEDERAL SHARE 195.34 + NONFEDERAL SHARE 734.82 = TOTAL AMOUNT 930.16

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33607
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet Cable Phones
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 433162.28
Date 10 / 12 / 2018
FEDERAL SHARE 56.99 + NONFEDERAL SHARE 214.35 = TOTAL AMOUNT 271.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 546.33, 2055.17, 2601.50

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33608
Della Rosa, Susann, , ,
Mailing Address 60 Don Avenue
City Rumford State RI Zip Code 02916
Purpose of Disbursement: Accounting Services (Non-Employee)
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 630.00 NONFEDERAL SHARE 2370.00 TOTAL AMOUNT 3000.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33609
Democracy Live
Mailing Address 2900 NE Blakeley Street
City Seattle State WA Zip Code 98105
Purpose of Disbursement: Software License
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 262.50 NONFEDERAL SHARE 987.50 TOTAL AMOUNT 1250.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33614
Domino's Pizza
Mailing Address 877 North Main Street
City Providence State RI Zip Code 02906
Purpose of Disbursement: Committee Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 21.43 NONFEDERAL SHARE 80.61 TOTAL AMOUNT 102.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 913.93, 3438.11, 4352.04

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33616 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
HealthSource RI Mailing Address PO Box 9711			Allocated Activity or Event Year-To-Date 437997.77			
City Providence	State RI	Zip Code 02940	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Health Insurance		Category/ Type	Allocated Activity or Event Year-To-Date 437997.77			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
101.53			381.92			483.45

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33619 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Lehigh Realty Mailing Address One Realty Way			Allocated Activity or Event Year-To-Date 439283.10			
City East Providence	State RI	Zip Code 02914	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Rent and CAM		Category/ Type	Allocated Activity or Event Year-To-Date 439283.10			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
269.92			1015.41			1285.33

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33620 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Lehigh Realty Mailing Address One Realty Way			Allocated Activity or Event Year-To-Date 439414.26			
City East Providence	State RI	Zip Code 02914	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Utilities		Category/ Type	Allocated Activity or Event Year-To-Date 439414.26			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
27.55			103.61			131.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.00		1500.94		1899.94

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Moore, Leslie, , , Transaction ID : H4.33623. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement (Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative), and Year-To-Date amount (440464.26).

Form B: RICOH USA, Inc. Transaction ID : H4.33627. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement (Copier Maintenance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative), and Year-To-Date amount (441426.75).

Form C: The Sandwich Hut Transaction ID : H4.33634. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement (Committee Refreshments), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative), and Year-To-Date amount (441446.75).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 426.83, NONFEDERAL SHARE 1605.66, TOTAL AMOUNT 2032.49

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33638 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
WRP Enterprises Mailing Address 221 Third Street			Allocated Activity or Event Year-To-Date 442296.75			
City Newport	State RI	Zip Code 02840	Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Rent		<input type="text"/>	Allocated Activity or Event Year-To-Date 442296.75			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="178.50"/>			<input type="text" value="671.50"/>			<input type="text" value="850.00"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33695 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Grande, Andrew, , , Mailing Address PO Box 3731			Allocated Activity or Event Year-To-Date 442332.11			
City Cranston	State RI	Zip Code 02910	Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Reimbursement		<input type="text"/>	Allocated Activity or Event Year-To-Date 442332.11			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="7.43"/>			<input type="text" value="27.93"/>			<input type="text" value="35.36"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33702 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Stop & Shop Mailing Address 575 Greenwich Avenue			Allocated Activity or Event Year-To-Date 0.00			
City Warwick	State RI	Zip Code 02886	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="7.43"/>			<input type="text" value="27.93"/>			<input type="text" value="35.36"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="185.93"/>		<input type="text" value="699.43"/>		<input type="text" value="885.36"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33696 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Bramblet, Sarah, , , Mailing Address 16 Anthony Street			Allocated Activity or Event Year-To-Date 442358.55			
City Johnston	State RI	Zip Code 02919	Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Reimbursement		<input type="text"/>	Allocated Activity or Event Year-To-Date 442358.55			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="5.56"/>			<input type="text" value="20.88"/>			<input type="text" value="26.44"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33703 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Dunkin Donuts Mailing Address 27 Jefferson Boulevard			Allocated Activity or Event Year-To-Date 0.00			
City Warwick	State RI	Zip Code 02888	Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="5.56"/>			<input type="text" value="20.88"/>			<input type="text" value="26.44"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33697 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Thomas, Jennifer, , , Mailing Address 213 Medway St Apt 5A			Allocated Activity or Event Year-To-Date 442406.06			
City Providence	State RI	Zip Code 02906	Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Reimbursement		<input type="text"/>	Allocated Activity or Event Year-To-Date 442406.06			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="9.98"/>			<input type="text" value="37.53"/>			<input type="text" value="47.51"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.54"/>		<input type="text" value="58.41"/>		<input type="text" value="73.95"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33705
Stop & Shop
Mailing Address 333 West River
City Providence State RI Zip Code 02904
Purpose of Disbursement: Committee Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 9.98 NONFEDERAL SHARE 37.53 TOTAL AMOUNT 47.51

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33698
Fellini Pizza
Mailing Address 2190 Broad Street
City Cranston State RI Zip Code 02905
Purpose of Disbursement: Committee Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 5.21 NONFEDERAL SHARE 19.58 TOTAL AMOUNT 24.79

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33699
Dunkin Donuts
Mailing Address 1245 North Main Street
City Providence State RI Zip Code 02906
Purpose of Disbursement: Committee Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 31.92 NONFEDERAL SHARE 120.04 TOTAL AMOUNT 151.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 37.13, 139.62, 176.75

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: CitiBusiness Card. Transaction ID: H4.33757. Mailing Address: PO Box 182564. City: Columbus, OH, Zip: 43210. Purpose: Credit Card Payment. Activity: Administrative. Date: 10/12/2018. Total Amount: 886.10.

Form B: Longhorn Steakhouse. Transaction ID: H4.33766. Mailing Address: 400 Bald Hill Road. City: Warwick, RI, Zip: 02886. Purpose: Meals. Activity: Administrative. Date: 09/08/2018. Total Amount: 40.00.

Form C: Longhorn Steakhouse. Transaction ID: H4.33767. Mailing Address: 400 Bald Hill Road. City: Warwick, RI, Zip: 02886. Purpose: Meals. Activity: Administrative. Date: 09/11/2018. Total Amount: 62.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 186.09, NONFEDERAL SHARE 700.01, TOTAL AMOUNT 886.10.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33768 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
1149 Restaurant Mailing Address 1149 Division Street			Allocated Activity or Event Year-To-Date 0.00			
City EAsT Greenwich	State RI	Zip Code 02818	Date: MM / DD / YYYY 09 / 12 / 2018			
Purpose of Disbursement: Meals		Category/ Type	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 09 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
11.76			44.24			56.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33769 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Chelo's of Warwick Mailing Address 2225 Post Road			Allocated Activity or Event Year-To-Date 0.00			
City Warwick	State RI	Zip Code 02886	Date: MM / DD / YYYY 09 / 20 / 2018			
Purpose of Disbursement: Meals		Category/ Type	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 09 / 20 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
7.35			27.65			35.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33770 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Spain Restaurant Mailing Address 1073 Reservoir Avenue			Allocated Activity or Event Year-To-Date 0.00			
City Cranston	State RI	Zip Code 02910	Date: MM / DD / YYYY 09 / 27 / 2018			
Purpose of Disbursement: Meals		Category/ Type	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 09 / 27 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
65.34			245.76			311.10

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)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Exeter Country Club. Transaction ID: H4.33771. Memo Item. Allocated Activity or Event: Administrative. Date: 09/08/2018. Total Amount: 10.00.

Form B: Safehouse. Transaction ID: H4.33773. Memo Item. Allocated Activity or Event: Administrative. Date: 09/13/2018. Total Amount: 65.00.

Form C: Public Kitchen. Transaction ID: H4.33775. Memo Item. Allocated Activity or Event: Administrative. Date: 09/26/2018. Total Amount: 180.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 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)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33778 Kay's
Mailing Address 1013 Cass Avenue
City Woonsocket State RI Zip Code 02895
Purpose of Disbursement: Meals
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/24/2018
FEDERAL SHARE 5.25 NONFEDERAL SHARE 19.75 TOTAL AMOUNT 25.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33780 TST at The Deck
Mailing Address 1 Waites Wharf
City Newport State RI Zip Code 02840
Purpose of Disbursement: Meals
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/29/2018
FEDERAL SHARE 21.42 NONFEDERAL SHARE 80.58 TOTAL AMOUNT 102.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33622 M.P. Cleaning Services
Mailing Address 60 Aberdeen Avenue
City Warwick State RI Zip Code 02888
Purpose of Disbursement: Office Maintenance
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 10/14/2018
FEDERAL SHARE 46.20 NONFEDERAL SHARE 173.80 TOTAL AMOUNT 220.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 46.20, 173.80, 220.00

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33625 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Postmaster Mailing Address Turnkey Station			Allocated Activity or Event Year-To-Date 443738.91			
City Providence	State RI	Zip Code 02940	Date: MM / DD / YYYY 10 / 14 / 2018			
Purpose of Disbursement: Committee Postage		Category/ Type	Allocated Activity or Event Year-To-Date 443738.91			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 14 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
10.50			39.50			50.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33700 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Sharpley, Lillian, , , Mailing Address 9819 South Blvd			Allocated Activity or Event Year-To-Date 443866.02			
City Cleveland	State OH	Zip Code 44108	Date: MM / DD / YYYY 10 / 14 / 2018			
Purpose of Disbursement: Reimbursement		Category/ Type	Allocated Activity or Event Year-To-Date 443866.02			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 14 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
26.70			100.41			127.11

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33706 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Stop & Shop Mailing Address 333 West River			Allocated Activity or Event Year-To-Date 0.00			
City Providence	State RI	Zip Code 02904	Date: MM / DD / YYYY 10 / 10 / 2018			
Purpose of Disbursement: Committee Refreshments		Category/ Type	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 10 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
15.63			58.78			74.41

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.20		139.91		177.11

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

Form A: Home Depot, Transaction ID: H4.33707. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: Home Depot, Transaction ID: H4.33708. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: Sacks, Joseph, , , Transaction ID: H4.33701. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (17.05), NONFEDERAL SHARE (64.09), and TOTAL AMOUNT (81.14).

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

Summary table for TOTAL showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Sacks, Joseph, , , Transaction ID: H4.33709. Includes fields for Mailing Address (15 Woodhaven Road), City (Barrington), State (RI), Zip Code (02806), Purpose of Disbursement (Mileage), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 12.18, NONFEDERAL SHARE 45.78, TOTAL AMOUNT 57.96.

Form B: Stop & Shop Transaction ID: H4.33710. Includes fields for Mailing Address (333 West River), City (Providence), State (RI), Zip Code (02904), Purpose of Disbursement (Committee Refreshments), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 2.69, NONFEDERAL SHARE 10.11, TOTAL AMOUNT 12.80.

Form C: RI Bridge & Turnpike Authority Transaction ID: H4.33711. Includes fields for Mailing Address (East Shore Road), City (Jamestown), State (RI), Zip Code (02835), Purpose of Disbursement (Toll), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 0.84, NONFEDERAL SHARE 3.16, TOTAL AMOUNT 4.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 0.00, NONFEDERAL SHARE 0.00, TOTAL AMOUNT 0.00.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: 7-Eleven. Transaction ID: H4.33712. Memo Item. Allocated Activity or Event: Administrative. Date: 09/11/2018. Total Amount: 6.38.

Form B: Amazon.com. Transaction ID: H4.33592. Allocated Activity or Event: Administrative. Date: 10/15/2018. Total Amount: 74.88.

Form C: BJ's Wholesale Club. Transaction ID: H4.33601. Allocated Activity or Event: Administrative. Date: 10/15/2018. Total Amount: 56.99.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 27.70, 104.17, 131.87.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33610
Division of Taxation
Mailing Address One Capitol Hill
City Providence State RI Zip Code 02908
Purpose of Disbursement: State Payroll Taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 444579.89
Date 10 / 15 / 2018
FEDERAL SHARE 105.19 + NONFEDERAL SHARE 395.67 = TOTAL AMOUNT 500.86

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33615
Dougherty, Elizabeth, , ,
Mailing Address PO Box 113
City Livingston State NY Zip Code 12541
Purpose of Disbursement: Net Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 445737.01
Date 10 / 15 / 2018
FEDERAL SHARE 243.00 + NONFEDERAL SHARE 914.12 = TOTAL AMOUNT 1157.12

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33617
Internal Revenue Service
Mailing Address PO Box 660351
City Dallas State TX Zip Code 75266
Purpose of Disbursement: Federal Payroll Taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 453227.06
Date 10 / 15 / 2018
FEDERAL SHARE 1572.92 + NONFEDERAL SHARE 5917.13 = TOTAL AMOUNT 7490.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1921.11, 7226.92, 9148.03

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33618 Memo Item

Juliano, Evan, , ,

Mailing Address 27 Sixth Avenue

City Pelham State NY Zip Code 10803

Purpose of Disbursement: Net Wages

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 454540.66

Date 10 / 15 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
275.86		1037.74		1313.60

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33626 Memo Item

Ramstad Albert, Kathryn, , ,

Mailing Address 30A Jenckes Street

City Providence State RI Zip Code 02903

Purpose of Disbursement: Net Wages

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 455659.78

Date 10 / 15 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
235.02		884.10		1119.12

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33628 Memo Item

Sacks, Joseph, , ,

Mailing Address 15 Woodhaven Road

City Barrington State RI Zip Code 02806

Purpose of Disbursement: Net Wages

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 456973.38

Date 10 / 15 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
275.86		1037.74		1313.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
786.74		2959.58		3746.32

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33629
Samsel, Emily, , ,
Mailing Address 25 Holden Street
City Providence State RI Zip Code 02908
Purpose of Disbursement: Net Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 458949.44
Date 10 / 15 / 2018
FEDERAL SHARE 414.98 + NONFEDERAL SHARE 1561.08 = TOTAL AMOUNT 1976.06

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33630
Sharpley, Lillian, , ,
Mailing Address 9819 South Blvd
City Cleveland State OH Zip Code 44108
Purpose of Disbursement: Net Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 460550.75
Date 10 / 15 / 2018
FEDERAL SHARE 336.28 + NONFEDERAL SHARE 1265.03 = TOTAL AMOUNT 1601.31

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33631
Slator, Isabel, , ,
Mailing Address 55 Bradford Street Apt 204
City Providence State RI Zip Code 02903
Purpose of Disbursement: Net Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 462398.40
Date 10 / 15 / 2018
FEDERAL SHARE 388.01 + NONFEDERAL SHARE 1459.64 = TOTAL AMOUNT 1847.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1139.27, 4285.75, 5425.02

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: The Sandwich Hut. Transaction ID: H4.33639. Mailing Address: 1253 North Main Street, Providence, RI 02904. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 462499.06. Date: 10/15/2018. Summary: FEDERAL SHARE 21.14 + NONFEDERAL SHARE 79.52 = TOTAL AMOUNT 100.66

Form B: Albaran, Orfilia, . Transaction ID: H4.33721. Mailing Address: 50 Highland Street, Pawtucket, RI 02860. Purpose: Office Maintenance. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 462589.06. Date: 10/15/2018. Summary: FEDERAL SHARE 18.90 + NONFEDERAL SHARE 71.10 = TOTAL AMOUNT 90.00

Form C: Amazon.com. Transaction ID: H4.33593. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 463119.19. Date: 10/16/2018. Summary: FEDERAL SHARE 111.33 + NONFEDERAL SHARE 418.80 = TOTAL AMOUNT 530.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 151.37, 569.42, 720.79

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Amazon.com, Transaction ID: H4.33594. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 95.02, NONFEDERAL SHARE 357.44, TOTAL AMOUNT 452.46.

Form B: Amazon.com, Transaction ID: H4.33595. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 51.24, NONFEDERAL SHARE 192.76, TOTAL AMOUNT 244.00.

Form C: Amazon.com, Transaction ID: H4.33596. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 23.08, NONFEDERAL SHARE 86.82, TOTAL AMOUNT 109.90.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 169.34, 637.02, 806.36.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are currently blank.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

Form A: Amazon.com, Transaction ID: H4.33597. Includes fields for Name, Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 130.06, NONFEDERAL SHARE 489.26, TOTAL AMOUNT 619.32.

Form B: Amazon.com, Transaction ID: H4.33598. Includes fields for Name, Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 1.79, NONFEDERAL SHARE 6.70, TOTAL AMOUNT 8.49.

Form C: Amazon.com, Transaction ID: H4.33599. Includes fields for Name, Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 11.32, NONFEDERAL SHARE 42.56, TOTAL AMOUNT 53.88.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 143.17, 538.52, 681.69.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33637
Wayland Bakery
Mailing Address 136 Wayland Avenue
City Providence State RI Zip Code 02906
Purpose of Disbursement: Meeting Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 464693.24
Date 10/16/2018
FEDERAL SHARE 18.06 + NONFEDERAL SHARE 67.94 = TOTAL AMOUNT 86.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33640
The Tuesday Company
Mailing Address 812 Lawrence Street
City Ann Arbor State MI Zip Code 48104
Purpose of Disbursement: Software
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 467243.24
Date 10/16/2018
FEDERAL SHARE 535.50 + NONFEDERAL SHARE 2014.50 = TOTAL AMOUNT 2550.00

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
Allocated Activity or Event Year-To-Date
Date
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 553.56, 2082.44, 2636.00

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 14168.44, 53298.64, 67467.08

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

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

NAME OF ACCOUNT: Levin Account; DATE OF RECEIPT: 10 / 12 / 2018; TOTAL AMOUNT TRANSFERRED: 48813.08

BREAKDOWN OF THIS TRANSFER Transaction ID : H5.33854. i) Voter Registration: 0.00; ii) Voter ID: 0.00; iii) GOTV: 48813.08; iv) Generic Campaign Activity: 0.00

NAME OF ACCOUNT; DATE OF RECEIPT; TOTAL AMOUNT TRANSFERRED

BREAKDOWN OF THIS TRANSFER. i) Voter Registration; ii) Voter ID; iii) GOTV; iv) Generic Campaign Activity

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only). TOTAL This Period (Voter Registration): 0.00; TOTAL This Period (Voter ID): 0.00; TOTAL This Period (GOTV): 48813.08; TOTAL This Period (Generic Campaign Activity): 0.00; TOTAL This Period (Total Amount of Transfers Received): 48813.08

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**
(To be used by State, District and Local Party Committees Only)

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

A. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item Rising Tide Interactive				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Transaction ID : H6.33725				Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">92137.84</div>	
Mailing Address 901 New York Avenue NW					
City Washington	State DC	Zip Code 20001	<input type="text"/>	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>	
Purpose of Disbursement Generic Digital Voter Education				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>

B. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address					
City	State	Zip Code	<input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Disbursement				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;"></div>			<div style="border: 1px solid black; padding: 2px;"></div>		<div style="border: 1px solid black; padding: 2px;"></div>

C. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address					
City	State	Zip Code	<input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Disbursement				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;"></div>			<div style="border: 1px solid black; padding: 2px;"></div>		<div style="border: 1px solid black; padding: 2px;"></div>

SUBTOTAL of Shared Federal and Levin Activity This Page					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))					
FEDERAL SHARE			LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>
TOTAL This Period for the Levin Share					
			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID : SL.33863

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee		
NAME OF ACCOUNT Levin Account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	52000.00	130978.05
(b) Unitemized	0.00	0.00
(c) Total	52000.00	130978.05
2. OTHER RECEIPTS	0.00	0.00
3. TOTAL RECEIPTS	52000.00	130978.05
(Add Lines 1c and 2)		
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0.00	0.00
(b) Voter ID	0.00	0.00
(c) GOTV	48813.08	107631.34
(d) Generic Campaign	0.00	0.00
(e) Total	48813.08	107631.34
5. OTHER DISBURSEMENTS	0.00	0.00
6. TOTAL DISBURSEMENTS	48813.08	107631.34
(Add Lines 4e and 5)		
7. BEGINNING CASH ON HAND	20788.89	629.10
(for Column B, use cash as of January 1st)		
8. RECEIPTS	52000.00	130978.05
(from Line 3)		
9. SUBTOTAL	72788.89	131607.15
(Add Lines 7 and 8)		
10. DISBURSEMENTS	48813.08	107631.34
(From Line 6)		
11. ENDING CASH ON HAND	23975.81	23975.81
(Subtract Line 10 From Line 9)		

**SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER: 1a 2
(check only one)

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

A. Bloomberg, Michael, , ,

Account : 8659

Mailing Address 17 E 79th Street

City New York State NY Zip Code 10022

Name of Employer (for Individual) Bloomberg LP

Occupation (for Individual) Executive

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33867

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

10000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

B. Fisher, Robert, , ,

Account : 8659

Mailing Address 1 Maritime Plaza

City San Francisco State CA Zip Code 94111

Name of Employer (for Individual) Pisces Inc

Occupation (for Individual) Managing Director

Date of Receipt

04 / 20 / 2018

Transaction ID : SASL1A.33868

Amount of Each Receipt this Period

5000.00

Aggregate Year-to-Date

6000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

C. Mandell, Mark, , ,

Account : 8659

Mailing Address One Park Row

City Providence State RI Zip Code 02903

Name of Employer (for Individual) Self-Employed

Occupation (for Individual) Attorney

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33866

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

10000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

D. Schusterman, Lynn, , ,

Account : 8659

Mailing Address PO Box 699

City Tulsa State OK Zip Code 74101

Name of Employer (for Individual) Retired

Occupation (for Individual) Retired

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33864

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

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

34000.00

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

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: 1a 2
 (check only one)

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

A. Schusterman, Stacy, , ,

Account : 8659

Mailing Address 2441 E 49th Street

City
Tulsa

State
OK

Zip Code
74119

Name of Employer (for Individual)
Samson Energy Co

Occupation (for Individual) Chief Executive Officer

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2018

Transaction ID : SASL1A.33865

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

B. Townsend, Allison, , ,

Account : 8659

Mailing Address 63 Alfred Stone Road

City
Barrington

State
RI

Zip Code
02806

Name of Employer (for Individual)
Not Employed

Occupation (for Individual) Not Employed

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2018

Transaction ID : SASL1A.33869

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

C.

Account :

Mailing Address

City

State

Zip Code

Name of Employer (for Individual)

Occupation (for Individual)

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Aggregate Year-to-Date

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item

D.

Account :

Mailing Address

City

State

Zip Code

Name of Employer (for Individual)

Occupation (for Individual)

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Aggregate Year-to-Date

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

18000.00

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

52000.00

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

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

FOR LINE NUMBER: PAGE 114 OF 114
(check only one) 4a 4c 5
 4b 4d

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

Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item			Date of Disbursement
A. Rhode Island Democratic State Committee			<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>
Mailing Address P.O. Box 6004			Transaction ID : SBSL4C.33870
City Providence	State RI	Zip Code 02940	Amount of Each Disbursement this Period
Purpose of Disbursement Levin Transfer			<input type="text" value="48813.08"/>
			Account : 8659

Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item			Date of Disbursement
B.			<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	<input type="text"/>
Purpose of Disbursement			Account :

Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item			Date of Disbursement
C.			<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	<input type="text"/>
Purpose of Disbursement			Account :

Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item			Date of Disbursement
D.			<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	<input type="text"/>
Purpose of Disbursement			Account :

Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item			Date of Disbursement
E.			<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	<input type="text"/>
Purpose of Disbursement			Account :

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="48813.08"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="48813.08"/>