

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

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

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  
Quarterly 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 (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2009

through

05

31

2009

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

Type or Print Name of Treasurer

William Lynch

Signature of Treasurer

Electronically Filed by William Lynch

Date

06

19

2009

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Rhode Island Democratic State Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	26331.27
(b) Cash on Hand at Beginning of Reporting Period .....	27660.55	
(c) Total Receipts (from Line 19) .....	32752.17	105871.91
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	60412.72	132203.18
7. Total Disbursements (from Line 31) .....	20988.67	92779.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	39424.05	39424.05
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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	9

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	5500.00	10000.00
(i) Itemized (use Schedule A) .....	200.00	425.00
(ii) Unitemized .....	5700.00	10425.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	0.00	0.00
(b) Political Party Committees .....	1000.00	1000.00
(c) Other Political Committees (such as PACs) .....	6700.00	11425.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡		
12. Transfers From Affiliated/Other Party Committees .....	11469.26	17919.48
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	4834.18
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	14582.91	71693.25
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	14582.91	71693.25
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	32752.17	105871.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	18169.26	34178.66

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2155.79	11801.43
(ii) Non-Federal Share.....	12216.18	67368.41
(b) Other Federal Operating Expenditures.....	6616.70	13133.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	20988.67	92303.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	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.....	0.00	225.87
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20988.67	92779.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8772.49	25410.72

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	6700.00	11425.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6700.00	11425.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8772.49	24934.85
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	4834.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8772.49	20100.67

Form/Schedule : **F3XN**

Transaction ID :

The loan on Schedule C has no interest rate and no determined due date. Transfers from joint fundraisers are received on a different schedule than Memo A's

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

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

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert Montecalvo

Mailing Address 375 Lloyd Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.15989

Amount of Each Receipt this Period

4000.00

**B.**

Full Name (Last, First, Middle Initial)

Obermayer Rebmann Maxwell & Hippel LLP

Mailing Address 1617 John F. Kennedy Blvd.

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.15997

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Walter Cohen

Mailing Address 200 Locust Street

City

Harrisburg

State

PA

Zip Code

17101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Obermayer Rebmann Maxwell

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.15997.0

Amount of Each Receipt this Period

1500.00

Partnership Contribution

[MEMO ITEM]

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

5500.00

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

5500.00

# **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 8 / 26

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

ECHOSTAR CORPORATION AND DISH NETWORK CORPORATION PAC (ECHOSTAR DISH NETWORK)

Mailing Address 1233 20TH STREET NW SUITE 302

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

C00330647

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 9

Transaction ID: SA11C.15966

Amount of Each Receipt this Period

1000.00

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

1000.00

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

1000.00



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

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

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

ASDC PARTNERSHIP PROGRAM

Mailing Address 430 South Capitol Street

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

C00402404

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

159.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 9

Transaction ID: SA12.15991

Amount of Each Receipt this Period

29.26

Fundraising transfer

**B.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 9

Transaction ID: SA12.16023

Amount of Each Receipt this Period

3220.00

In-kind - Voter file acce-  
ss

**C.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 9

Transaction ID: SA12.16026

Amount of Each Receipt this Period

3220.00

In-kind - Voter file Acce-  
ss

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

6469.26

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

<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.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17760.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 9

Transaction ID: SA12.15968

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional) ▶

5000.00

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

11469.26

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 26

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

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

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
In-kind - Voter file access

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.16025

Date of Disbursement

05 / 05 / 2009

Amount of Each Disbursement this Period

3220.00

**B.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
In-kind - Voter file Access

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.16027

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

3220.00

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

6440.00

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

6440.00

**SCHEDULE C (FEC Form 3X)**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 12 / 26

FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Transaction ID: SC/9.5183

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Licht 88 Committee

Election:

- ☐
- Primary
- 
- ☐
- General
- 
- ☐
- 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

Date Due

Interest Rate

Secured:

M M  
1 2D D  
3 1Y Y Y Y  
1 9 8 8

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

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 13 / 26

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10NAME OF COMMITTEE (In Full)  
Rhode Island Democratic State Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SHELDON II WHITEHOUSENature of Debt (Purpose):  
Coordinated expenditures  
overage

Mailing Address 32 ELMGROVE AVENUE

City State ZIP Code  
PROVIDENCE RI 02906

Outstanding Balance Beginning This Period

4.60

Transaction ID: SD9.14176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.60

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

4.60

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

4.60

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

5249.87

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

5254.47

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

PAGE 14 / 26  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

NAME OF ACCOUNT

RI Democratic Non-federal Account

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	9

TOTAL AMOUNT TRANSFERRED

14582.91

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

14582.91

Transaction ID: H3.15990

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

14582.91

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) .....

14582.91

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

 PAGE 15 / 26  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Mailing Address

PO Box 660351

City	State	Zip Code
Dallas	TX	75266

 Purpose of Disbursement:  
Payroll tax deposit
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

66576.09

Date 05 / 07 / 2009

Transaction ID: H4.15981

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
266.74		1511.48		1778.22

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

Mailing Address

481 Charles Street

City	State	Zip Code
Providence	RI	02904

 Purpose of Disbursement:  
Net wages
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

68425.17

Date 05 / 12 / 2009

Transaction ID: H4.15974

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.36		1571.72		1849.08

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

Mailing Address

PO Box 1057

City	State	Zip Code
Providence	RI	02901

 Purpose of Disbursement:  
Employee Health Insurance
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

68660.75

Date 05 / 18 / 2009

Transaction ID: H4.15970

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.34		200.24		235.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
579.44		3283.44		3862.88

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 16 / 26  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Cox Communications

Mailing Address

P.O. Box 39

City State Zip Code  
 Newark NJ 07101

Purpose of Disbursement:  
 Monthly modem and cable

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68817.75

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15971

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.55

133.45

157.00

**B. Full Name (Last, First, Middle Initial)**  
 Susann Della Rosa

Mailing Address

60 Don Avenue

City State Zip Code  
 Rumford RI 02916

Purpose of Disbursement:  
 Accounting Services-non employee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

70217.75

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15972

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

210.00

1190.00

1400.00

**C. Full Name (Last, First, Middle Initial)**  
 Division of Taxation

Mailing Address

One Capitol Hill

City State Zip Code  
 Providence RI 02908

Purpose of Disbursement:  
 State Payroll taxes

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

70491.17

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15973

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.01

232.41

273.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

274.56

1555.86

1830.42

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



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

PAGE 17 / 26  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 IKON Office Solutions

Mailing Address

P.O. Box 30069

City State Zip Code  
 Hartford CT 06150

Purpose of Disbursement:  
 Copier Lease

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

70714.17

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15976

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.45

189.55

223.00

**B. Full Name (Last, First, Middle Initial)**  
 Pui O

Mailing Address

249 Roosevelt Avenue

City State Zip Code  
 Pawtucket RI 02860

Purpose of Disbursement:  
 May rent & electricity

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

71514.17

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15978

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

120.00

680.00

800.00

**C. Full Name (Last, First, Middle Initial)**  
 Raymond J Sullivan, Jr.

Mailing Address

2 Cornell Court

City State Zip Code  
 Coventry RI 02816

Purpose of Disbursement:  
 General communications consultant

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

73514.17

Date M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 9

Transaction ID: H4.15979

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

300.00

1700.00

2000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

453.45

2569.55

3023.00

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)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 18 / 26

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Verizon

Mailing Address

P.O. Box 1100

City State Zip Code

Albany

NY

12250

Purpose of Disbursement:  
Telephone serviceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

73749.71

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	9

Transaction ID: H4.15982

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.33

200.21

235.54

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

Card Services

Mailing Address

PO Box 13337

City State Zip Code

Philadelphia

PA

19101

Purpose of Disbursement:  
Credit Card PaymentCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

73914.99

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	9

Transaction ID: H4.15992

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.79

140.49

165.28

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

Postmaster

Mailing Address

Turnkey Station

City State Zip Code

Providence

RI

02940

Purpose of Disbursement:  
Office postageCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	0	9

Transaction ID: H4.16000

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.40

19.28

22.68

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

60.12

340.70

400.82

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 TIVO Store

Mailing Address

2160 Gold Street

City	State	Zip Code
Alviso	CA	95002

Purpose of Disbursement:  
 TIVO rental

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 04 / 19 / 2009

Transaction ID: H4.16001

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.89

22.01

25.90

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

Mailing Address

551 North Main Street

City	State	Zip Code
Providence	RI	02906

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 04 / 24 / 2009

Transaction ID: H4.16002

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.53

31.35

36.88

**C. Full Name (Last, First, Middle Initial)**  
 Walgreen's

Mailing Address

100 Broad Street

City	State	Zip Code
Pawtucket	RI	02860

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 04 / 24 / 2009

Transaction ID: H4.16003

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.48

8.39

9.87

**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)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

551 North Main Street

City

State

Zip Code

Providence

RI

02906

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date  /  /

Transaction ID: H4.16004

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.49

59.46

69.95

**B. Full Name (Last, First, Middle Initial)**  
 Card Services

Mailing Address

PO Box 13337

City

State

Zip Code

Philadelphia

PA

19101

Purpose of Disbursement:  
 Credit Card Payment

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74399.84

Date  /  /

Transaction ID: H4.15993

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.73

412.12

484.85

**C. Full Name (Last, First, Middle Initial)**  
 Hemenway's Seafood

Mailing Address

1 Providence Washington Plaza

City

State

Zip Code

Providence

RI

02903

Purpose of Disbursement:  
 Meeting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date  /  /

Transaction ID: H4.16006

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.97

39.48

46.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.73

412.12

484.85

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

 PAGE 21 / 26  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
US Airways

Mailing Address

Theodore Francis Green Airport

 City State Zip Code  
Warwick RI 02886

 Purpose of Disbursement:  
Airfare
Category/  
Type
 Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

 Date M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: H4.16007

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

65.76

372.64

438.40

**B. Full Name (Last, First, Middle Initial)**  
A T & T Mobility

Mailing Address

PO Box 536216

 City State Zip Code  
Atlanta GA 30353

 Purpose of Disbursement:  
Cell phone service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

74546.31

 Date M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 9

Transaction ID: H4.15969

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.97

124.50

146.47

**C. Full Name (Last, First, Middle Initial)**  
William Lynch

Mailing Address

321 South Main Street

 City State Zip Code  
Providence RI 02903

 Purpose of Disbursement:  
Reimburse travel expenses
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

74656.31

 Date M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 9

Transaction ID: H4.15977

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.50

93.50

110.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.47

218.00

256.47

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Richmond Limousine Service

Mailing Address  
 5500 Lewis Road

City State Zip Code  
 Sandston VA 23150

Purpose of Disbursement:  
 Taxi fare

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 9

Transaction ID: H4.16016

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.50

25.50

30.00

**B. Full Name (Last, First, Middle Initial)**  
 US Airways

Mailing Address  
 Theodore Francis Green Airport

City State Zip Code  
 Warwick RI 02886

Purpose of Disbursement:  
 Baggage fees

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 9

Transaction ID: H4.16018

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.50

25.50

30.00

**C. Full Name (Last, First, Middle Initial)**  
 Broad Street Cab

Mailing Address  
 Broad Street

City State Zip Code  
 Richmond VA 23250

Purpose of Disbursement:  
 Cab fare

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 9

Transaction ID: H4.16019

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.00

17.00

20.00

**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)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 26  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 The Taximan

Mailing Address

Pat Embrey

City	State	Zip Code
Richmond	VA	23150

Purpose of Disbursement:  
 Cab fare

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	5

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.16021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

**B. Full Name (Last, First, Middle Initial)**  
 American Express

Mailing Address

300 South Riverside Plaza

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement:  
 Credit Card Payment

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

75320.76

Date 

M	M
0	5

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.15994

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.66		564.79		664.45

**C. Full Name (Last, First, Middle Initial)**  
 Thunder Grill

Mailing Address

50 Massachusetts Ave. NW

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Meeting

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	4

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.16008

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.94		73.36		86.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.66		564.79		664.45

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Hot Wok Cafe

Mailing Address

752 Hope Street

City State Zip Code

Providence RI 02906

Purpose of Disbursement:  
MeetingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	5

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.16009

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.67

49.13

57.80

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

Al Forno Restaurant

Mailing Address

577 South Main Street

City State Zip Code

Providence RI 02903

Purpose of Disbursement:  
MeetingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	5

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.16011

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.50

155.86

183.36

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

Southwest Airlines

Mailing Address

Theodore Francis Green Airport

City State Zip Code

Warwick RI 02886

Purpose of Disbursement:  
AirfareCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	4

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H4.16012

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.19

114.41

134.60

**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)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 26

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobile Menu

Mailing Address

725 Branch Avenue

City	State	Zip Code
Providence	RI	02904

Purpose of Disbursement:  
 Meeting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 05 / 01 / 2009

Transaction ID: H4.16013

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.08

108.11

127.19

**B. Full Name (Last, First, Middle Initial)**  
 Old Canteen, Inc.

Mailing Address

120 Atwells Avenue

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:  
 Meeting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 05 / 14 / 2009

Transaction ID: H4.16015

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.28

63.92

75.20

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

Mailing Address

481 Charles Street

City	State	Zip Code
Providence	RI	02904

Purpose of Disbursement:  
 Net wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77169.84

Date 05 / 29 / 2009

Transaction ID: H4.15975

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

277.36

1571.72

1849.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

277.36

1571.72

1849.08

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

PAGE 26 / 26  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial)  
Raymond J Sullivan, Jr.

Mailing Address

2 Cornell Court

City State Zip Code

Coventry RI 02816

Purpose of Disbursement:  
General communications consultant

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79169.84

Date <sup>M M</sup> 0 5 / <sup>D D</sup> 2 9 / <sup>Y Y Y Y</sup> 2 0 0 9

Transaction ID: H4.15980

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

300.00

1700.00

2000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

300.00

1700.00

2000.00

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

2155.79

12216.18

14371.97