

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** 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 11 23 2010 through 12 31 2010

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

Type or Print Name of Treasurer Jeffrey Padwa

Signature of Treasurer Electronically Filed by Jeffrey Padwa Date 05 13 2011

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)

A. Form/Schedule : **F3XA**

Transaction ID :

The loan on Schedule C on no interest rate and no determined due date. No employees worked more than 25% on a federal campaign. There will be no transfers from Dollars for Democrats for 2010 as expenses incurred were greater than receipts. Transfers from joint fundraisers are distributed on a different schedule than Memo reports. Any fundraising expenses were not involved with a specific event

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		38161.84
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	19541.22									
(c) Total Receipts (from Line 19)	56036.55	696849.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75577.77	735011.02								
7. Total Disbursements (from Line 31)	31960.66	691393.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43617.11	43617.11								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	5254.47									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	0.00	70200.00
(ii) Unitemized	0.00	2870.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	73070.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	68318.52
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	141388.52
12. Transfers From Affiliated/Other Party Committees	10000.00	201252.36
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)	6457.17	7812.02
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)	35159.38	341976.28
(b) Levin Funds (from Schedule H5)	4420.00	4420.00
(c) Total Transfer (add 18(a) and 18(b)).	39579.38	346396.28
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	56036.55	696849.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16457.17	350452.90

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.....	2218.45	70191.23
(ii) Non-Federal Share.....	12571.14	349350.64
(b) Other Federal Operating Expenditures.....	14619.10	57711.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29408.69	477253.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	6427.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	5000.00
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	23859.87
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	780.00
(ii) "Levin" Share	0.00	4420.00
(b) Federal Election Activity Paid Entirely With Federal Funds	2551.97	173653.64
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	2551.97	178853.64
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31960.66	691393.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19389.52	337623.27

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)	0.00	141388.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	141388.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16837.55	127902.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	6457.17	7812.02
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10380.38	120090.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 47

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
DNC Service Corp

Mailing Address 430 S. 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 ▼

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

Transaction ID: SA11AI.17442

Amount of Each Receipt this Period 992.75

RI Party Victory Fund Uni-temized

[MEMO ITEM]

B.

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

Mailing Address 17 Camden Court

City Wakefield State RI Zip Code 02879

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Transaction ID: SA11AI.17440

Amount of Each Receipt this Period 190.00

RI Party Victory Fund

[MEMO ITEM]

C.

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

Mailing Address 430 S CAPITOL ST SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Transaction ID: SA11AI.17437

Amount of Each Receipt this Period 970.00

Dollars for Democrats

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 47
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol St. SE		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA12.17350
C C00010603		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	Transfer
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="186860.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol St. SE		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA12.17351
C C00010603		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	Transfer
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="191860.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 47
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input checked="" 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) Chad Radock		Date of Receipt
	Mailing Address 54 Lincoln Drive		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Leominster	MA	01453
	FEC ID number of contributing federal political committee.		Transaction ID: SA15.17352
Name of Employer None		Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="241.77"/>
			Cobra Health Insurance

B.	Full Name (Last, First, Middle Initial) Voter Activation Network		Date of Receipt
	Mailing Address 54 Regent Street		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cambridge	MA	02140
	FEC ID number of contributing federal political committee.		Transaction ID: SA15.17349
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="6215.40"/>
			Refund unused deposit

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6457.17"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6457.17"/>

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

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

Mailing Address PO Box 1057

City Providence State RI Zip Code 02901

Purpose of Disbursement
Cobra Health Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17322

Date of Disbursement

12 / 13 / 2010

Amount of Each Disbursement this Period

241.77

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

Mailing Address PO Box 1057

City Providence State RI Zip Code 02901

Purpose of Disbursement
Cobra Health Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17340

Date of Disbursement

12 / 28 / 2010

Amount of Each Disbursement this Period

241.77

C. Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address PO Box 15153

City Wilmington State DE Zip Code 19886

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17360

Date of Disbursement

12 / 13 / 2010

Amount of Each Disbursement this Period

1711.76

SUBTOTAL of Disbursements This Page (optional) ▶

2195.30

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)

PAGE 11 / 47

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

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

A.	Full Name (Last, First, Middle Initial) Extra Space Storage	Transaction ID: SB21B.17360.0 Date of Disbursement																			
	Mailing Address 1640 Hartford Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												
	City Johnston State RI Zip Code 02919	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Storage space rental	<table border="1"><tr><td>1711.76</td></tr></table>	1711.76																		
1711.76																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Susann Della Rosa	Transaction ID: SB21B.17321 Date of Disbursement																			
	Mailing Address 60 Don Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	3	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	3	/	2	0	1	0												
	City Rumford State RI Zip Code 02916	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Accounting services - non employee	<table border="1"><tr><td>3300.00</td></tr></table>	3300.00																		
3300.00																					
	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:																				

C.	Full Name (Last, First, Middle Initial) Stephanie DeSilva	Transaction ID: SB21B.17320 Date of Disbursement																			
	Mailing Address 17 Waldron Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	1	0												
	City Cranston State RI Zip Code 02910	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Net wages	<table border="1"><tr><td>1573.95</td></tr></table>	1573.95																		
1573.95																					
	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)	<table border="1"><tr><td>4873.95</td></tr></table>	4873.95
4873.95		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Stephanie DeSilva	Transaction ID: SB21B.17342 Date of Disbursement 12 / 21 / 2010
	Mailing Address 17 Waldron Avenue	Amount of Each Disbursement this Period 759.64
	City Cranston State RI Zip Code 02910	
	Purpose of Disbursement Net wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Stephanie DeSilva	Transaction ID: SB21B.17343 Date of Disbursement 12 / 30 / 2010
	Mailing Address 17 Waldron Avenue	Amount of Each Disbursement this Period 1573.95
	City Cranston State RI Zip Code 02910	
	Purpose of Disbursement Net wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) E-Online Data	Transaction ID: SB21B.17344 Date of Disbursement 12 / 02 / 2010
	Mailing Address 280 Fore Street	Amount of Each Disbursement this Period 10.00
	City Portland State ME Zip Code 04101	
	Purpose of Disbursement Credit card fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2343.59

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)

PAGE 13 / 47

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

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

A. Full Name (Last, First, Middle Initial) Amy Gabarra <hr/> Mailing Address 497 Broadway <hr/> City Providence State ID Zip Code 02909 <hr/> Purpose of Disbursement General fundraising consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17319 Date of Disbursement 11 / 29 / 2010
	Amount of Each Disbursement this Period 3500.00
B. Full Name (Last, First, Middle Initial) Konica Minolta Business Solutions <hr/> Mailing Address DEPT AT 952823 <hr/> City Atlanta State GA Zip Code 31192 <hr/> Purpose of Disbursement Copier usage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17323 Date of Disbursement 12 / 13 / 2010
	Amount of Each Disbursement this Period 1671.26

SUBTOTAL of Disbursements This Page (optional)	5171.26
TOTAL This Period (last page this line number only)	14584.10

**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 14 / 47

<input 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 checked="" 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) Division of Taxation		Transaction ID: SB30B.17345	
	Mailing Address One Capitol Hill		Date of Disbursement 12 / 13 / 2010	
	City Providence	State RI	Zip Code 02908	Amount of Each Disbursement this Period 314.93
	Purpose of Disbursement State Payroll taxes		Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

B.	Full Name (Last, First, Middle Initial) United States Treasury		Transaction ID: SB30B.17346	
	Mailing Address PO Box 660351		Date of Disbursement 12 / 15 / 2010	
	City Dallas	State TX	Zip Code 75266	Amount of Each Disbursement this Period 2237.04
	Purpose of Disbursement Federal Payroll taxes		Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

SUBTOTAL of Disbursements This Page (optional)	▶	2551.97
TOTAL This Period (last page this line number only)	▶	2551.97

SCHEDULE C (FEC Form 3X)

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

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: <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 M M 1 2 D D 3 1 Y Y Y Y 1 9 8 8	Date Due	Interest Rate	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="5249.87"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="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 16 / 47	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHELDON II WHITEHOUSE	Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address 32 ELMGROVE AVENUE	
City State ZIP Code PROVIDENCE RI 02906	

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

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

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	16529.29

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	16529.29	Transaction ID: H3.17381
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)	
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	M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 1 0	15996.19

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	15996.19	Transaction ID: H3.17380
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)	
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	M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 1 0	2633.90

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2633.90	Transaction ID: H3.17379
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)	35159.38
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)	35159.38

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

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

A. Full Name (Last, First, Middle Initial) IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 30069			Allocated Activity or Event Year-To-Date 387239.01		
City Hartford	State CT	Zip Code 06150	Date <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Copier lease			Transaction ID: H4.17314		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.45		189.55		223.00

B. Full Name (Last, First, Middle Initial) GP Pier Retail			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 Jackson Walkway			Allocated Activity or Event Year-To-Date 387489.01		
City Providence	State RI	Zip Code 02903	Date <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Rent			Transaction ID: H4.17315		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		212.50		250.00

C. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 388303.04		
City Albany	State NY	Zip Code 12250	Date <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Telephone service			Transaction ID: H4.17316		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.10		691.93		814.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.05		1093.98		1287.03

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial)
City of Providence

Mailing Address
25 Dorrance Street

City	State	Zip Code	Category/ Type
Providence	RI	02903	

Purpose of Disbursement:
Election night security

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
388726.16

Date / /
Transaction ID: H4.17317

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.47		359.65		423.12

B. Full Name (Last, First, Middle Initial)
Chelo's of Warwick

Mailing Address
2225 Post Road

City	State	Zip Code	Category/ Type
Warwick	RI	02886	

Purpose of Disbursement:
Meeting food expense

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
388750.46

Date / /
Transaction ID: H4.17318

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		20.65		24.30

C. Full Name (Last, First, Middle Initial)
151 Broadway Associates

Mailing Address
151 Broadway

City	State	Zip Code	Category/ Type
Providence	RI	02903	

Purpose of Disbursement:
Rent and utilities

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
389400.46

Date / /
Transaction ID: H4.17324

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.50		552.50		650.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.62		932.80		1097.42

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) A T & T Universal Card			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 8214			Allocated Activity or Event Year-To-Date 389916.22																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17347			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	2	9	/	2	0	1	0																
So. Hackensack	NJ	07606																							
Purpose of Disbursement: Credit card payment			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.37		438.39		515.76

B. Full Name (Last, First, Middle Initial) Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Turnkey Station			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17395			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	7	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	2	7	/	2	0	1	0																
Providence	RI	02940																							
Purpose of Disbursement: Mailing fees			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.75		15.55		18.30

C. Full Name (Last, First, Middle Initial) Chris Gasbarro Wine & Spirits			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 98 Highland Avenue			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17396			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	3	0	/	2	0	1	0																
Seekonk	MA	02771																							
Purpose of Disbursement: Election night refreshments			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.64		116.97		137.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.37		438.39		515.76

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Rite Aid Store			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 456 Branch Avenue			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Category/ Type []	
Providence	RI	02904		
Purpose of Disbursement: Election night refreshments			Date M M / D D / Y Y Y Y [1 0 / 3 1 / 2 0 1 0]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17397	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3.21]		[18.16]		[21.37]

B. Full Name (Last, First, Middle Initial) Cumberland Farms			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 350 North Broadway			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Category/ Type []	
Rumford	RI	02916		
Purpose of Disbursement: Election night supplies			Date M M / D D / Y Y Y Y [1 1 / 0 2 / 2 0 1 0]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17398	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3.14]		[17.80]		[20.94]

C. Full Name (Last, First, Middle Initial) Providence Biltmore			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Kennedy Plaza			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Category/ Type []	
Providence	RI	02903		
Purpose of Disbursement: Lodging			Date M M / D D / Y Y Y Y [1 1 / 0 4 / 2 0 1 0]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17400	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[47.63]		[269.91]		[317.54]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.00]		[0.00]		[0.00]

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

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

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

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

A. Full Name (Last, First, Middle Initial) Edwin Pacheco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 12 Camp Dixie Road			Allocated Activity or Event Year-To-Date 390255.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Transaction ID: H4.17348			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/				D	D	/	Y	Y	Y	Y													
Pascoag	RI	02859																							
Purpose of Disbursement: Reimbursement			Category/ Type																						
Activity or Event Identifier: Administrative			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	2	9	/	2	0	1	0																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.95		288.75		339.70

B. Full Name (Last, First, Middle Initial) Caribe Hilton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1 San Geronimo Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Transaction ID: H4.17367			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/				D	D	/	Y	Y	Y	Y													
San Juan	PR	00901																							
Purpose of Disbursement: Lodging			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	2	1	/	2	0	1	0																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.60		162.05		190.65

C. Full Name (Last, First, Middle Initial) American Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address TFGreen Airport			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Transaction ID: H4.17368			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/				D	D	/	Y	Y	Y	Y													
Warwick	RI	02888																							
Purpose of Disbursement: Baggage fees			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	7	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	1	7	/	2	0	1	0																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.95		288.75		339.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Starbucks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date [0.00]	
City San Juan	State PR	Zip Code 00901	Category/ Type	
Purpose of Disbursement: Refreshments			[]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y [1 1 / 1 8 / 2 0 1 0]	
			Transaction ID: H4.17369	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.65]		[3.68]		[4.33]

B. Full Name (Last, First, Middle Initial) Starbucks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date [0.00]	
City San Juan	State PR	Zip Code 00901	Category/ Type	
Purpose of Disbursement: Meals			[]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y [1 1 / 1 9 / 2 0 1 0]	
			Transaction ID: H4.17370	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[2.94]		[16.69]		[19.63]

C. Full Name (Last, First, Middle Initial) Starbucks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date [0.00]	
City San Juan	State PR	Zip Code 00901	Category/ Type	
Purpose of Disbursement: Refreshments			[]	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y [1 1 / 2 1 / 2 0 1 0]	
			Transaction ID: H4.17371	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.65]		[3.68]		[4.33]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.00]		[0.00]		[0.00]

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

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

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

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

A. Full Name (Last, First, Middle Initial) Pina Colada Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date 0.00		
City San Juan	State PR	Zip Code 00901	Date <input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Meals			Transaction ID: H4.17372		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.33		35.90		42.23

B. Full Name (Last, First, Middle Initial) Restaurante Raices			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Viejo			Allocated Activity or Event Year-To-Date 0.00		
City San Juan	State PR	Zip Code 00901	Date <input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Meals			Transaction ID: H4.17374		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.26		18.48		21.74

C. Full Name (Last, First, Middle Initial) Subway			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address San Geronimo			Allocated Activity or Event Year-To-Date 0.00		
City San Juan	State PR	Zip Code 00901	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Meals			Transaction ID: H4.17377		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.02		5.77		6.79

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**

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

A. Full Name (Last, First, Middle Initial) 151 Broadway Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 151 Broadway			Allocated Activity or Event Year-To-Date 390905.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 12 / 13 / 2010 Transaction ID: H4.17325	
Providence	RI	02903		
Purpose of Disbursement: Rent and utilities			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.50		552.50		650.00

B. Full Name (Last, First, Middle Initial) Beacon Mutual Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address One Beacon Centre			Allocated Activity or Event Year-To-Date 391312.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 12 / 13 / 2010 Transaction ID: H4.17327	
Warwick	RI	02886		
Purpose of Disbursement: Workers Compensation Insurance			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.05		345.95		407.00

C. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1057			Allocated Activity or Event Year-To-Date 392207.47	
City	State	Zip Code	Date M M / D D / Y Y Y Y 12 / 13 / 2010 Transaction ID: H4.17328	
Providence	RI	02901		
Purpose of Disbursement: Health Insurance			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.18		760.37		894.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
292.73		1658.82		1951.55

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) DirecTV			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2230 E. Imperial Hwy			Allocated Activity or Event Year-To-Date 392287.35		
City El Segundo	State CA	Zip Code 90245	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Monthly service			Transaction ID: H4.17330		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.98		67.90		79.88

B. Full Name (Last, First, Middle Initial) Division of Taxation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Capitol Hill			Allocated Activity or Event Year-To-Date 392686.28		
City Providence	State RI	Zip Code 02908	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: State payroll taxes			Transaction ID: H4.17332		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.84		339.09		398.93

C. Full Name (Last, First, Middle Initial) Anthony Simon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 126 Cathedral Avenue			Allocated Activity or Event Year-To-Date 392845.32		
City Providence	State RI	Zip Code 02908	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: H4.17353		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.86		135.18		159.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.68		542.17		637.85

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Sprint Mailing Address PO Box 105243 City State Zip Code Atlanta GA 30348 Purpose of Disbursement: Cell phone service Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/> Transaction ID: H4.17401
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.86"/>		<input type="text" value="135.18"/>		<input type="text" value="159.04"/>

B. Full Name (Last, First, Middle Initial) Shelby Hanson Mailing Address 23 Applejack Lane City State Zip Code Seekonk MA 02771 Purpose of Disbursement: Party Logo Designer Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/> Transaction ID: H4.17354
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="183.75"/>		<input type="text" value="1041.25"/>		<input type="text" value="1225.00"/>

C. Full Name (Last, First, Middle Initial) Joseph Shekarchi Mailing Address 33 College Hill Road City State Zip Code Warwick RI 02886 Purpose of Disbursement: Reimbursement Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/> Transaction ID: H4.17356
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="22.44"/>		<input type="text" value="127.12"/>		<input type="text" value="149.56"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="206.19"/>		<input type="text" value="1168.37"/>		<input type="text" value="1374.56"/>

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
<input type="text"/>		<input type="text"/>		<input type="text"/>

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

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

A. Full Name (Last, First, Middle Initial)
Aurora Civic Association

Mailing Address
289 Broadway

City State Zip Code
Providence RI 02903

Purpose of Disbursement:
Meeting

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date

0.00

Date 11 / 24 / 2010

Transaction ID: H4.17402

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
10.88 + 61.63 = 72.51

B. Full Name (Last, First, Middle Initial)
The Foundry Cafe

Mailing Address
235 Promenade Street

City State Zip Code
Providence RI 02908

Purpose of Disbursement:
Meeting

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date

0.00

Date 12 / 03 / 2010

Transaction ID: H4.17404

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
7.52 + 42.63 = 50.15

C. Full Name (Last, First, Middle Initial)
The Foundry Cafe

Mailing Address
235 Promenade Street

City State Zip Code
Providence RI 02908

Purpose of Disbursement:
Meeting

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date

0.00

Date 12 / 06 / 2010

Transaction ID: H4.17406

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
4.04 + 22.86 = 26.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Stephanie DeSilva			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 17 Waldron Avenue			Allocated Activity or Event Year-To-Date 394262.91		
City	State	Zip Code	Category/ Type		
Cranston	RI	02910			
Purpose of Disbursement: Reimbursement			Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17358		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.45		36.58		43.03

B. Full Name (Last, First, Middle Initial) Starbucks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/ Type		
San Juan	PR	00901			
Purpose of Disbursement: Refreshments			Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17362		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.96		5.46		6.42

C. Full Name (Last, First, Middle Initial) Starbucks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Caribe Hilton			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/ Type		
San Juan	PR	00901			
Purpose of Disbursement: Refreshments			Date <input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17364		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.74		9.87		11.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.45		36.58		43.03

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Vibra Lunch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Calle Dufault Esq. drive			Allocated Activity or Event Year-To-Date 0.00		
City San Juan	State PR	Zip Code 00908	Date MM / DD / YYYY 11 / 18 / 2010		
Purpose of Disbursement: Meals			Transaction ID: H4.17365		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

B. Full Name (Last, First, Middle Initial) Chase Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15153			Allocated Activity or Event Year-To-Date 395220.60		
City Wilmington	State DE	Zip Code 19886	Date MM / DD / YYYY 12 / 13 / 2010		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.17359		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.66		814.03		957.69

C. Full Name (Last, First, Middle Initial) CVS Pharmacy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1919 Mineral Spring Avenue			Allocated Activity or Event Year-To-Date 0.00		
City North Providence	State RI	Zip Code 02904	Date MM / DD / YYYY 10 / 27 / 2010		
Purpose of Disbursement: Office supplies			Transaction ID: H4.17382		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.92		5.18		6.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.66		814.03		957.69

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial)
BJ's Wholesale Club

Mailing Address
1300 Hartford Avenue

City State Zip Code
Johnston RI 02919

Purpose of Disbursement:
Office supplies

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 10 / 29 / 2010

Transaction ID: H4.17383

Activity or Event Identifier:
Administrative
[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
14.15 + 80.19 = 94.34

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

Mailing Address
Turnkey Station

City State Zip Code
Providence RI 02940

Purpose of Disbursement:
Office postage

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 11 / 08 / 2010

Transaction ID: H4.17384

Activity or Event Identifier:
Administrative
[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
6.60 + 37.40 = 44.00

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

Mailing Address
598 Branch Avenue

City State Zip Code
Providence RI 02904

Purpose of Disbursement:
Gas

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 11 / 10 / 2010

Transaction ID: H4.17385

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial)
Gulf Oil
Mailing Address
1889 Plainfield Pike
City State Zip Code
Johnston RI 02919
Purpose of Disbursement:
Gas
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 11 / 10 / 2010
Transaction ID: H4.17386

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.25		63.75		75.00

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
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 11 / 16 / 2010
Transaction ID: H4.17387

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

C. Full Name (Last, First, Middle Initial)
Postmaster
Mailing Address
Turnkey Station
City State Zip Code
Providence RI 02940
Purpose of Disbursement:
Office postage
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 11 / 16 / 2010
Transaction ID: H4.17388

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.20		74.80		88.00

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**

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

A. Full Name (Last, First, Middle Initial) Caribe Hilton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 San Geronimo Street			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 1 0 Transaction ID: H4.17389	
San Juan	PR	00901		
Purpose of Disbursement: Lodging			Category/ Type []	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.10		476.55		560.65

B. Full Name (Last, First, Middle Initial) US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Theodore Francis Green Airport			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 1 0 Transaction ID: H4.17390	
Warwick	RI	02886		
Purpose of Disbursement: Baggage fees			Category/ Type []	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

C. Full Name (Last, First, Middle Initial) Phillips Seafood			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Charlotte Airport			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 1 0 Transaction ID: H4.17391	
Charlotte	NC	28208		
Purpose of Disbursement: Meals			Category/ Type []	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.94		16.66		19.60

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**

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

A. Full Name (Last, First, Middle Initial) Stephanie DeSilva			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 17 Waldron Avenue			Allocated Activity or Event Year-To-Date 396794.55		
City	State	Zip Code	Category/ Type		
Cranston	RI	02910			
Purpose of Disbursement: Net wages			Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17329		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.09		1337.86		1573.95

B. Full Name (Last, First, Middle Initial) United States Treasury			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660351			Allocated Activity or Event Year-To-Date 399097.72		
City	State	Zip Code	Category/ Type		
Dallas	TX	75266			
Purpose of Disbursement: Payroll tax deposit			Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17336		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
345.48		1957.69		2303.17

C. Full Name (Last, First, Middle Initial) A T & T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 536216			Allocated Activity or Event Year-To-Date 399249.33		
City	State	Zip Code	Category/ Type		
Atlanta	GA	30353			
Purpose of Disbursement: Cell phone service			Date <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17326		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.74		128.87		151.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
604.31		3424.42		4028.73

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

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

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

A. Full Name (Last, First, Middle Initial) Sprint			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 105243			Allocated Activity or Event Year-To-Date 399600.08																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17337			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	1	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	2	1	/	2	0	1	0																
Atlanta	GA	30348																							
Purpose of Disbursement: Cell Phone service			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.61		298.14		350.75

B. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 399947.55																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17338			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	1	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	2	1	/	2	0	1	0																
Albany	NY	12250																							
Purpose of Disbursement: Telephone service			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.12		295.35		347.47

C. Full Name (Last, First, Middle Initial) Edwin Pacheco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 12 Camp Dixie Road			Allocated Activity or Event Year-To-Date 400611.05																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4.17361			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	1	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	2	1	/	2	0	1	0																
Pascoag	RI	02859																							
Purpose of Disbursement: Reimbursement			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.53		563.97		663.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.26		1157.46		1361.72

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Rhode Island Convention Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Sabin Street			Allocated Activity or Event Year-To-Date [0.00]		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 12 / 04 / 2010		
Purpose of Disbursement: Parking			Transaction ID: H4.17407		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[1.50]		[8.50]		[10.00]

B. Full Name (Last, First, Middle Initial) Union Station Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Citizens Plaza			Allocated Activity or Event Year-To-Date [0.00]		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 12 / 21 / 2010		
Purpose of Disbursement: Parking			Transaction ID: H4.17408		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[1.35]		[7.65]		[9.00]

C. Full Name (Last, First, Middle Initial) Luxe Burger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5 Memorial Blvd			Allocated Activity or Event Year-To-Date [0.00]		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 12 / 21 / 2010		
Purpose of Disbursement: Meeting			Transaction ID: H4.17409		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3.60]		[20.82]		[24.42]

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**

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

A. Full Name (Last, First, Middle Initial) Boston Market			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 633 No Main Street			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02904	Date <input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2010"/> Transaction ID: H4.17411		
Purpose of Disbursement: Meeting		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.69		15.22		17.91

B. Full Name (Last, First, Middle Initial) W Washington DC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 515 15th Street NW			Allocated Activity or Event Year-To-Date 0.00		
City Washington	State DC	Zip Code 20004	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/> Transaction ID: H4.17413		
Purpose of Disbursement: Lodging		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.31		154.75		182.06

C. Full Name (Last, First, Middle Initial) JetBlue			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 Terminal C			Allocated Activity or Event Year-To-Date 0.00		
City Boston	State MA	Zip Code 02128	Date <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2010"/> Transaction ID: H4.17415		
Purpose of Disbursement: Airfare		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.16		165.24		194.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Johnny Rockets			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Logan International Airport			Allocated Activity or Event Year-To-Date 0.00		
City Boston	State MA	Zip Code 02128	Date MM / DD / YYYY 12 / 16 / 2010		
Purpose of Disbursement: Meals			Transaction ID: H4.17416		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.39		13.55		15.94

B. Full Name (Last, First, Middle Initial) J & G Steakhouse			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Pennsylvania Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Washington	State DC	Zip Code 20004	Date MM / DD / YYYY 12 / 16 / 2010		
Purpose of Disbursement: Meals			Transaction ID: H4.17418		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.87		33.23		39.10

C. Full Name (Last, First, Middle Initial) Max & Erma's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dulles Airport			Allocated Activity or Event Year-To-Date 0.00		
City Dulles	State VA	Zip Code 20166	Date MM / DD / YYYY 12 / 17 / 2010		
Purpose of Disbursement: Meals			Transaction ID: H4.17420		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.50		14.17		16.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial)
Massport Parking Facilities

Mailing Address
One Harborside Drive

City State Zip Code
Boston MA 02128

Purpose of Disbursement:
Parking fees

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 17 / 2010

Transaction ID: H4.17422

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		20.40		24.00

B. Full Name (Last, First, Middle Initial)
Dulles Flyer Taxi

Mailing Address
23035 Douglas Ct

City State Zip Code
Sterling VA 20166

Purpose of Disbursement:
Taxi fares

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 16 / 2010

Transaction ID: H4.17424

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.75		55.25		65.00

C. Full Name (Last, First, Middle Initial)
Dulles Flyer Taxi

Mailing Address
23035 Douglas Ct

City State Zip Code
Sterling VA 20166

Purpose of Disbursement:
Taxi fares

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 17 / 2010

Transaction ID: H4.17426

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.75		55.25		65.00

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)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

A. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1057			Allocated Activity or Event Year-To-Date 401505.60		
City Providence	State RI	Zip Code 02901	Date MM / DD / YYYY 12 / 28 / 2010		
Purpose of Disbursement: Health Insurance			Transaction ID: H4.17334		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.18		760.37		894.55

B. Full Name (Last, First, Middle Initial) Postmaster			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Turnkey Station			Allocated Activity or Event Year-To-Date 300.00		
City Providence	State RI	Zip Code 02940	Date MM / DD / YYYY 12 / 13 / 2010		
Purpose of Disbursement: Office Postage			Transaction ID: H4.17333		
Activity or Event Identifier: Hope Awards 2006(10/16/2006)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		255.00		300.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.18		1015.37		1194.55

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
2218.45		12571.14		14789.59

**SCHEDULE H5 (FEC Form 3X)
 TRANSFERS OF LEVIN FUNDS FOR
 SHARED 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

M M / D D / Y Y Y Y
 1 2 / 1 3 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

4420.00

Transaction ID: H5.17435

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

0.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

1700.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

2720.00

iv) **Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

0.00

TOTAL This Period (Voter ID).....

1700.00

TOTAL This Period (GOTV).....

2720.00

TOTAL This Period (Generic Campaign Activity).....

0.00

TOTAL This Period (Total Amount of Transfers Received).....

4420.00

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.17427

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)	4420.00	4420.00
b. Unitemized.....	0.00	0.00
c. Total.....	4420.00	4420.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	4420.00	4420.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	1700.00	1700.00
c. GOTV.....	2720.00	2720.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	4420.00	4420.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	4420.00	4420.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	0.00	0.00
8. RECEIPTS..... (from Line 3)	4420.00	4420.00
9. SUBTOTAL..... (Add Lines 7 and 8)	4420.00	4420.00
10. DISBURSEMENTS..... (From Line 6)	4420.00	4420.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	0.00	0.00

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:
(check only one) 1a 2

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

A. Full Name (Last, First, Middle Initial)
Brian Goldner

Mailing Address 387 Washington Road

City	State	Zip Code
Barrington	RI	02806

Name of Employer or Principal Place of Business
Hasbro

Occupation
CEO

Transaction ID: SASL1A.17431

Date of Receipt

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

Amount of Each Receipt this Period

4420.00

Aggregate Year-to-Date

4420.00

Account: 8659

SUBTOTAL of Receipts This Page (optional)	4420.00
TOTAL This Period (last page this line number only)	4420.00

**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: (check only one)		PAGE 46 / 47
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
	<input checked="" type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Rhode Island Democratic State Committee	Transaction ID: SBSL4B.17433 Date of Disbursement
	Mailing Address P.O. Box 6004	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	City State Zip Code Providence RI 02940	Amount of Each Disbursement this Period <input type="text" value="1700.00"/>
	Purpose of Disbursement Transfer	Account: 8659

SUBTOTAL of Disbursements This Page (optional)	1700.00
TOTAL This Period (last page this line number only)	1700.00

**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: (check only one)		PAGE 47 / 47
	<input type="checkbox"/> 4a	<input checked="" type="checkbox"/> 4c	<input type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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

A. Full Name (Last, First, Middle Initial) / Full Organization Name Rhode Island Democratic State Committee	Transaction ID: SBSL4C.17434																			
	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y											
1	2		1	3		2	0	1	0											
Mailing Address P.O. Box 6004	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2720.00</td> </tr> </table>	2720.00																		
2720.00																				
City State Zip Code Providence RI 02940	Account: 8659																			
Purpose of Disbursement Transfer																				

SUBTOTAL of Disbursements This Page (optional)	▶	2720.00
TOTAL This Period (last page this line number only)	▶	2720.00