FEC FORM 1

Office

Use

Only

STATEMENT OF **ORGANIZATION**

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Office Use Only

FEC FORM 1

(Revised 06/2012)

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
RHODE ISLAND RI	EPUBLICAN STAT	E CENTRAL CO	DMMITTEE	
ADDRESS (number and street)	1800 POST ROAD			
	SUITE 17-I			
io onangoa)	WARWICK	1	RI 02886	
	CITY A		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRES	SS			
(Check if address is changed)	chair@ri.gop			
	Optional Second E-Mail Addre	ess		
COMMITTEE'S WEB PAGE ADD (Check if address is changed)	RESS (URL)			
2. DATE 10 / 28	2025			
3. FEC IDENTIFICATION NU	MBER ▶ C C00	078196		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined thi	s Statement and to the best of	f my knowledge and belief	it is true, correct and co	omplete.
Type or Print Name of Treasurer	Jamison, Linda, , ,			
Signature of Treasurer Jamise	on, Linda, , ,		Date 10	28 2025
NOTE: Submission of false, erroned	ous, or incomplete information ma	av subject the person signing	this Statement to the pe	nalties of 52 U.S.C. 830109

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	tion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	ittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized col	mmittee.
Name of Candidate	
Party Committee:	
(d) X This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on li	ne 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a scommittee. (i.e., nonconnected committee)	separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6	6.)
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution a	ccounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net process committees or committees of a feet of the committee of the committee of a feet of the committee of	·
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	· · · · · · · · · · · · · · · · · · ·
Committees Participating in Joint Fundraiser	
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Write or Type Committee Name

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6.	Name of Any Connected Or	ganization, Affiliated C	committee, Joint Fu	ndraising Repre	esentative, or Lead	ership PAC Sponsor
	TRUMP 47 COMMIT	TEE, INC.				
	Mailing Address	P.O. BOX 509				
		ARLINGTON			VA 2221	6
			CITY A		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliate	d Organization	Joint Fundraising	Representative	Leadership PAC Sponsor
	_	_			_	
7.	Custodian of Records: Identi books and records.	fy by name, address (pho	one number option	al) and position o	f the person in posse	ession of committee
	Jamison, Li	nda, , ,				
	Full Name					
	Mailing Address	7 Ocean Ave				
		Jamestown			RI 0283	5
			CITY A		STATE ▲	ZIP CODE ▲
	Title or Position ▼					
	Treasurer			Telephone num	ber 401 –	741 - 6864
8.	Treasurer: List the name and any designated agent (e.g., a		er optional) of the	treasurer of the	committee; and the	name and address of
	Full Name Jamison, Li	nda, , ,				ı
	of Treasurer					
	Mailing Address	7 Ocean Ave				
		Jamestown			RI 0283	5
			CITY A		STATE ▲	ZIP CODE ▲
	Title or Position ▼					
	Treasurer			Telephone num	ber 401 –	741 - 6864
1						

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	Full Name of Designated Agent			
	Mailing Address			
			STATE A	ZIP CODE ▲
	Title or Position	,		
		Telephone numb	oer	
•	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee ces or maintains funds.	e deposits funds, hole	ds accounts, rents
	Name of Bank, D	epository, etc.		
		TD BANK	1 1 1 1 1 1	
	Mailing Address	2625 W Shore Rd		
		Warwick	RI 02889	
		CITY ▲ S	STATE A	ZIP CODE ▲
	Name of Bank, D	epository, etc.		
		CHAIN BRIDGE BANK NA		
	Mailing Address	1445 -A LAUGHLIN AVENUE		
		MCLEAN	VA 22101	
		CITY ▲ S	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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NRSC Victory Mailing Address 228 Suit Alexandres Alexandres Connected Organic Connected Organic Pesignated Agent: Identify by narrow Mailing Address	ation, Affiliated Committee, Joint S. Washinton St6 CITY cation Affiliated Committee andria cation Affiliated Committee	STA X Joint Fundraising Rep	mber C mber C mber C entative, or Leadership PAC Sp VA 22102 ATE ZIP CODE ZIP CODE
3. 4. 4. Alexandre of Any Connected Organian NRSC Victory Mailing Address Relationship: Connected Organian Connected Organia Connected O	S. Washinton St6 2 115 andria CITY aration Affiliated Committee	FEC ID nur FEC ID nur FEC ID nur Fundraising Represe	mber C mber C entative, or Leadership PAC Sp VA 22102 ATE ZIP CODE
4.	S. Washinton St6 2 115 andria CITY aration Affiliated Committee	FEC ID nur Fundraising Represe	entative, or Leadership PAC Spanish VA 22102 TIP CODE
lame of Any Connected Organi NRSC Victory Mailing Address Suit Alex Relationship: Connected Organi esignated Agent: Identify by nar Full Name Mailing Address TITLE OR POSITION ▼	S. Washinton St6 2 115 andria CITY aration Affiliated Committee	Fundraising Represe	entative, or Leadership PAC Spanish PAC Sp
NRSC Victory	S. Washinton St6 2 115 andria CITY aration Affiliated Committee	STA X Joint Fundraising Rep	VA 22102 — ZIP CODE A
NRSC Victory Mailing Address 228 Suit Alexander Alexander Alexander Agent: Identify by narrow Mailing Address 1	S. Washinton St6 2 115 andria CITY aration Affiliated Committee	STA X Joint Fundraising Rep	VA 22102 — ZIP CODE A
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esignated Agent: Identify by nar Full Name Mailing Address TITLE OR POSITION ▼			Diresentative Leadership PAC
TITLE OR POSITION ▼			
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	CITY A	STAT	TE ▲ ZIP CODE ▲
		Telephone Numbe	er
afety deposit boxes or maintains	t all banks or other depositories in unds.	which the committee of	deposits funds, holds accounts, r
ame of Bank, epository, etc.			
Mailing Address			
L			

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
REPUBLICAN NATI	ONAL COMMITTEE		
Mailing Address	310 First Street, SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
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