

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

Office Use Only

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

Rhode Island Democratic State Committee

ADDRESS (number and street)

P.O. Box 6004

☐Check if different
than previously
reported. (ACC)

Providence

RI

02940

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00136200

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2007

through

09

30

2007

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

John McConnell, Jr.

Signature of Treasurer

Electronically Filed by John McConnell, Jr.

Date

10

20

2007

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. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		54799.15
(b) Cash on Hand at Beginning of Reporting Period	42797.14	
(c) Total Receipts (from Line 19)	12416.55	139893.76
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55213.69	194692.91
7. Total Disbursements (from Line 31)	15367.30	154846.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39846.39	39846.39
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	5254.47	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	7

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

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 / 27

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

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) MRS KAREN BLACK		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 6 / 2 0 0 7
Mailing Address 275 MEADOW TREE FARM RD		Transaction ID: SA11A1.14660
City SAUNDERSTOWN	State RI	Zip Code 02874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SOUTH COUNTY HOSPITAL	Occupation REGISTERED NURSE	Dollars for Democrats
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) MRS KAREN BLACK		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 7
Mailing Address 275 MEADOW TREE FARM RD		Transaction ID: SA11A1.14661
City SAUNDERSTOWN	State RI	Zip Code 02874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SOUTH COUNTY HOSPITAL	Occupation REGISTERED NURSE	Dollars for Democrats
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Robert Cohen		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address 150 Union Street Apt. 604		Transaction ID: SA11A1.14628
City Providence	State RI	Zip Code 02903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Student	Occupation Student	Dollars for Democrats
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.14670

Amount of Each Receipt this Period

1752.75

RI Party Victory Fund Uni-
temized

[MEMO ITEM]

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

City State Zip Code
Chepachet RI 02814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dinos Park And Shop

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.14667

Amount of Each Receipt this Period

71.25

RI Party Victory Fund

[MEMO ITEM]

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

City State Zip Code
Chepachet RI 02814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dinos Park And Shop

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.14666

Amount of Each Receipt this Period

71.25

RI Party Victory Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 27

(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harold Nomer
Mailing Address 2717 P Perry Hwy

City State Zip Code
Wakefield RI 02879

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.14669

Amount of Each Receipt this Period

237.50

RI Party Victory Fund

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. Marvin Perry
Mailing Address 21 Smith St

City State Zip Code
Bristol RI 02809

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIDLT

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.14664

Amount of Each Receipt this Period

95.00

RI Party Victory Fund

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
UNITEMIZED CONTRIBUTIONS
Mailing Address 430 S CAPITOL ST SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.14662

Amount of Each Receipt this Period

2095.00

Dollars for Democrats

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 27

(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. UNITEMIZED CONTRIBUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 430 S CAPITOL ST SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 09 30 2007

Transaction ID: SA11A1.14671

Amount of Each Receipt this Period

53.32

ASDC Partnership Program
Unitemized

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

200.00

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

FOR LINE NUMBER: PAGE 10 / 27

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Mailing Address 430 South Capitol St. SE

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

22700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	7

Transaction ID: SA12.14623

Amount of Each Receipt this Period

3100.00

In-kind - Voter file acce-
ss

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

3100.00

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

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

FOR LINE NUMBER: PAGE 11 / 27

(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) National Grid Mailing Address Processing Center City State Zip Code Woburn MA 01807 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1137.38		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 7 Transaction ID: SA15.14622 Amount of Each Receipt this Period 1024.80 Deposit Refund
B. Full Name (Last, First, Middle Initial) Josh Panger Mailing Address 7101 Zoar Avenue City State Zip Code Lubbock TX 79424 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1784.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 7 Transaction ID: SA15.14594 Amount of Each Receipt this Period 223.00 Cobra payment

SUBTOTAL of Receipts This Page (optional)

1247.80

TOTAL This Period (last page this line number only)

1247.80

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 27

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Blue Cross Blue Shield of Rhode Island

Mailing Address PO Box 1057

City
Providence

State
RI

Zip Code
02901

Purpose of Disbursement
Cobra health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.14608

Date of Disbursement

09 / 24 / 2007

Amount of Each Disbursement this Period

223.23

Full Name (Last, First, Middle Initial)

B. Democratic National Committee

Mailing Address 430 South Capitol St. SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
In-kind - Voter file access

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.14624

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

3100.00

SUBTOTAL of Disbursements This Page (optional)

3323.23

TOTAL This Period (last page this line number only)

3323.23

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

PAGE 13 / 27

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Transaction ID: SC/9.5183

LOAN SOURCE Full Name (Last, First, Middle Initial)

Licht 88 Committee

Election:

- ☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 350 Cole Avenue

City Providence

State RI

ZIP Code 02906

Original Amount of Loan

5249.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5249.87

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

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

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5249.87

TOTALS This Period (last page in this line only) ▶

5249.87

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 / 27

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

4.60

Transaction ID: SD9.14176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.60

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

4.60

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

4.60

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

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

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

PAGE 15 / 27
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

NAME OF ACCOUNT

RI Democratic Non-federal Account

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	7

TOTAL AMOUNT TRANSFERRED

7643.75

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7643.75

Transaction ID: H3.14625

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

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

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

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

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

7643.75

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

7643.75

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

PAGE 16 / 27

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

United States Treasury

Mailing Address

PO Box 660351

City State Zip Code

Dallas TX 75266

Purpose of Disbursement:
Payroll tax depositCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

84221.17

Date

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

Transaction ID: H4.14604

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

331.08

588.58

919.66

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

Cox Communications

Mailing Address

P.O. Box 39

City State Zip Code

Newark NJ 07101

Purpose of Disbursement:
Monthly modem and cableCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

84378.17

Date

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

Transaction ID: H4.14595

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

56.52

100.48

157.00

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

Susann Della Rosa

Mailing Address

60 Don Avenue

City State Zip Code

Rumford RI 02916

Purpose of Disbursement:
Accounting Services-non employeeCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

86228.17

Date

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

Transaction ID: H4.14596

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

666.00

1184.00

1850.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1053.60

1873.06

2926.66

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

PAGE 17 / 27

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
 EMC Insurance

Mailing Address
 PO Box 7911

City State Zip Code
 Warwick RI 02887

Purpose of Disbursement:
 Property/Liability Insurance

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87676.17

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

Transaction ID: H4.14598

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

521.28

926.72

1448.00

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

Mailing Address
 249 Roosevelt Avenue

City State Zip Code
 Pawtucket RI 02860

Purpose of Disbursement:
 September rent and electricity

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

88476.17

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

Transaction ID: H4.14603

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

288.00

512.00

800.00

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

Mailing Address
 481 Charles Street

City State Zip Code
 Providence RI 02904

Purpose of Disbursement:
 Net wages

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

90296.77

Date M M / D D / Y Y Y Y
 0 9 / 1 4 / 2 0 0 7

Transaction ID: H4.14599

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

655.42

1165.18

1820.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1464.70

2603.90

4068.60

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

PAGE 18 / 27

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

United States Treasury

Mailing Address

PO Box 660351

City State Zip Code

Dallas TX 75266

Purpose of Disbursement:

Payroll tax deposit

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

91216.43

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Transaction ID: H4.14605

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

331.08

588.58

919.66

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

Division of Taxation

Mailing Address

One Capitol Hill

City State Zip Code

Providence RI 02908

Purpose of Disbursement:

State Payroll taxes

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

91496.53

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	7

Transaction ID: H4.14597

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

100.84

179.26

280.10

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

IKON Office Solutions

Mailing Address

P.O. Box 30069

City State Zip Code

Hartford CT 06150

Purpose of Disbursement:

Copier Lease

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

91719.53

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	7

Transaction ID: H4.14601

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

80.28

142.72

223.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

512.20

910.56

1422.76

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Mailing Address
 Turnkey Station

City State Zip Code
 Providence RI 02940

Purpose of Disbursement:
 Post office box annual rental

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91823.53

Date M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 0 7

Transaction ID: H4.14602

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.44

66.56

104.00

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

Mailing Address
 P.O. 1

City State Zip Code
 Worcester MA 01654

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92057.06

Date M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 0 7

Transaction ID: H4.14607

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

84.07

149.46

233.53

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

Mailing Address
 PO Box 1057

City State Zip Code
 Providence RI 02901

Purpose of Disbursement:
 Employee Health Insurance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92503.52

Date M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 0 7

Transaction ID: H4.14611

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

160.73

285.73

446.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

282.24

501.75

783.99

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Mailing Address

321 South Main Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Reimburse taxi faresCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

92578.52

Date

M	M
0	9

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.14612

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.00

48.00

75.00

B. Full Name (Last, First, Middle Initial)
 City Cab

Mailing Address

1512 Marsh Avenue

City	State	Zip Code
Kansas City	MO	64106

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

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	9

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.14616

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.00

48.00

75.00

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

Mailing Address

300 South Riverside Plaza

City	State	Zip Code
Chicago	IL	60606

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

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

93883.88

Date

M	M
0	9

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.14613

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

469.92

835.44

1305.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

496.92

883.44

1380.36

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

PAGE 21 / 27
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Camille's

Mailing Address

71 Bradford Street

City State Zip Code

Providence RI 02903

Purpose of Disbursement:
Meeting 8/29/07Category/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: H4.14618

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

88.95

158.14

247.09

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

Waterplace Restaurant

Mailing Address

One Finance Way

City State Zip Code

Providence RI 02903

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

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

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

Transaction ID: H4.14619

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

172.85

307.29

480.14

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

Bravo Brasserie

Mailing Address

123 Empire Street

City State Zip Code

Providence RI 02903

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

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

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

Transaction ID: H4.14620

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.87

19.33

30.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

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

Mailing Address
 477 Broadway

City	State	Zip Code
Providence	RI	02909

Purpose of Disbursement:
 Meeting

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

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

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 09 / 05 / 2007

Transaction ID: H4.14621

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

197.25

350.68

547.93

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

Mailing Address
 PO Box 660351

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement:
 Payroll tax deposit

Category/
Type

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

94803.54

Date 09 / 27 / 2007

Transaction ID: H4.14606

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

331.08

588.58

919.66

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

Mailing Address
 481 Charles Street

City	State	Zip Code
Providence	RI	02904

Purpose of Disbursement:
 Net wages

Category/
Type

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

96624.14

Date 09 / 28 / 2007

Transaction ID: H4.14600

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

655.42

1165.18

1820.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

986.50

1753.76

2740.26

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

4796.16

8526.47

13322.63

Image# 27990862510

Form/Schedule: **F3XN**

The loan on Schedule C has no interest rate and no determined due date. The unitemized items for Line 30 (b) were stale dated checks for canvasser stipends. Schedule Memo A's from joint fundraisers are distributed on a different schedule than transfers.

Transaction ID:

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.14660**

Image# 27990862511

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.14661**

Form/Schedule: **SA11A1** RI Party Victory Fund Unitemized

Transaction ID: **SA11A1.14670**

Image# 27990862512

Form/Schedule: **SA11A1** RI Party Victory Fund

Transaction ID: **SA11A1.14667**

Form/Schedule: **SA11A1** RI Party Victory Fund

Transaction ID: **SA11A1.14666**

Image# 27990862513

Form/Schedule: **SA11A1** RI Party Victory Fund

Transaction ID: **SA11A1.14669**

Form/Schedule: **SA11A1** RI Party Victory Fund

Transaction ID: **SA11A1.14664**

Image# 27990862514

Form/Schedule:**SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.14662**

Form/Schedule:**SA11A1** ASDC Partnership Program

Transaction ID: **SA11A1.14671**
