FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) RHODE ISLAND REPUBLICAN STATE CENTRAL COMMITTEE 1800 POST ROAD ADDRESS (number and street) SUITE 17-I (Check if address is changed) **WARWICK** 02886 RΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS chair@ri.gop (Check if address is changed) Optional Second E-Mail Address ljamison0419@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00078196 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jamison, Linda,, Date 04 06 2025 Signature of Treasurer Jamison, Linda, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	age 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candic information below.)	date
Name of Candidate	
Candidate Office Starty Affiliation Sought: House Senate President	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	rict
Name of Candidate	
Party Committee: (d) This committee is a STA (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party Committee:	arty
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ization is a:
Corporation Corporation w/o Capital Stock Labor Organization	tion
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 separate segregated fund committee. (i.e., nonconnected committee)	or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 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 accounts (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 proceeds for two or more proceeds committees/organizations, at least one of which is an authorized committee of a federal candidate.	political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	political
Committees Participating in Joint Fundraiser	
1	=

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Write or Type Committee Name

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6.	Name of Any Connected Or	rganization, Affilia	ted Committee, Joint Fo	undraising Repre	esentative, or I	_eadership PAC Spor	nsor
	NRSC Victory						
		1228 S. Washinton	St6				
	Mailing Address						
		Suite 115					
		Alexandria			VA L	22102	
			CITY ▲		STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization A	Affiliated Organization	Joint Fundraising	Representative	Leadership PAC	Sponsor
7.	Custodian of Records: Identi books and records.	ify by name, addres	s (phone number optior	nal) and position o	f the person in p	oossession of committe	ee
	Jamison, Li	inda, , ,					
	Full Name						
	Mailing Address	7 Ocean Ave					
		Jamestown			RI L	02835	
			CITY ▲		STATE ▲	ZIP CODE ▲	
	Title or Position ▼						
	Assistant Treasurer			Telephone num	ber 401		8864
8.	Treasurer: List the name and any designated agent (e.g., a			e treasurer of the	committee; and	d the name and addre	ess of
	Full Name Jamison, Li	inda					
	of Treasurer						
	Mailing Address	7 Ocean Ave					
		Jamestown			RI L	02835	
			CITY A		STATE ▲	ZIP CODE ▲	
	Title or Position ▼						
	Treasurer			Telephone num	ber 401		5864
1							

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Full Name of Designated Agent Mailing Address	HIRONS, PHIL, , ,		
J			
	SMITHFIELD	SC 02917	
	CITY ▲	STATE ▲ ZIP CODE ▲	
Title or Position	SURER	hone number 401 - 439 - 53	312
	Depositories: List all banks or other depositories in which the oxes or maintains funds.	committee deposits funds, holds accounts, rent	s
Name of Bank,	Depository, etc.		
	TD BANK		
Mailing Address	2625 W Shore Rd		
	Warwick	RI 02889	
	CITY ▲	STATE ▲ ZIP CODE ▲	
Name of Bank,	Depository, etc.		
	CHAIN BRIDGE BANK NA		I
Mailing Address	1445 -A LAUGHLIN AVENUE		
			ш
	MCLEAN	VA 22101	
	CITY ▲	STATE ▲ 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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1.			
l		FEC ID numbe	C
2.		FEC ID numbe	C
3.		FEC ID numbe	C
4.		FEC ID numbe	C
Iame of Any Connected	l Organization, Affiliated Committee, Join	t Fundraising Representat	ive, or Leadership PAC Spon
Mailing Address	138 Conant Street		
	2nd Floor		
	Beverly	MA MA	01915
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite dafety deposit boxes or mail arms of Bank,	pries: List all banks or other depositories in aintains funds.	Telephone Number	sits funds, holds accounts, ren
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	pries: List all banks or other depositories in aintains funds.	Telephone Number	
Mailing Address TITLE OR POSITION anks or Other Deposite dafety deposit boxes or mail arms of Bank,	pries: List all banks or other depositories in aintains funds.	Telephone Number	sits funds, holds accounts, ren
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or main and of Bank, repository, etc.	pries: List all banks or other depositories in aintains funds.	Telephone Number which the committee depo	sits funds, holds accounts, ren

FEC Form 1S (Revised 02/2017)

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

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h). Joint Fundraisi	J		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
		'	
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TRUMP 47 COMMIT	TEE, INC.		
Martin Addison	P.O. BOX 509		
Mailing Address			
	APLINCTON		22246
5.00	ARLINGTON	VA	22216
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X July July July July July July July July	oint Fundraising Represent	ative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whitaintains funds.	STATE A Telephone Number	ZIP CODE A
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