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#### **FEC** FORM 3X

Only

#### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Rhode Island Democratic State Committee P.O. Box 6004 ADDRESS (number and street) Check if different than previously Providence RI 02940 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00136200 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2006 0 4 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. John McConnell, Jr. Type or Print Name of Treasurer Electronically Filed by John McConnell, Jr. 05 20 2006 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 02/2003)

FEC Form 3X (Rev. 02/2003)

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Rhode Island Democratic State Committee D D D D 0.4 0 1 2006 0.4 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2006 110469.32 January 1 (b) Cash on Hand at 66809.66 Begining of Reporting Period ..... 106916.95 185887.84 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 173726.61 296357.16 6(a) and 6(c) for Column B) ..... 72712.84 195343.39 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 101013.77 101013.77 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 5249.87 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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:

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2006

o. 0 4

<sup>D</sup> 3 0

2006

	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	800.00
	(ii) Unitemized	0.00	200.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	1000.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	7000.00	12600.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7000.00	13600.00
2.	Transfers From Affiliated/Other Party Committees	81963.72	127863.35
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	385.00	885.00
•	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	17568.23	43539.49
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	17568.23	43539.49
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	106916.95	185887.84
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	89348.72	142348.35

#### **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)	0.400.05	10050.07
	(i) Federal Share	8486.95	18256.67
	(ii) Non-Federal Share	31926.79	68679.30
	(b) Other Federal Operating		
	Expenditures	7972.90	49934.74
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	48386.64	136870.71
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees	0.00	0.00
•	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
١.	Independent Expenditure	0.00	0.00
5	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
<b>3</b> .	Loan Repayments Made	0.00	0.00
		0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(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	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	24326.20	58472.68
	(c) Total Federal Election Activity (add	24326.20	58472.68
	Lines 30(a)(i), 30(a)(ii) and 30(b))	27020.20	30472.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	72712.84	195343.39
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	10700.05	10000100
	from Line 31)	40786.05	126664.09

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operat Expenditures	ting COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans from Line 11(d), page 3)	·	13600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7000.00	13600.00
36. Total Federal Operating Expenditure (add Line 21(a)(i) and Line 21(b))	16/50 95	68191.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	385.00	885.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16074.85	67306.41

<b>IT</b>	CHEDULE A (FEC Form 3X)  EMIZED RECEIPTS  by information copied from such Reports and State for commercial purposes, other than using the results.	itements may	Use separate schedule(s) or each category of the Detailed Summary Page  not be sold or used by any perso dress of any political committee to	FOR LINE NUMBER: PAGE 6 / 32 (check only one)  11a 11b X 11c 12 13 14 15 16 17  In for the purpose of soliciting contributions solicit contributions from such committee.
A.	NAME OF COMMITTEE (In Full) Rhode Island Democratic State Commit  Full Name (Last, First, Middle Initial) Friends of Patrick J. Kennedy Mailing Address P O Box 321  City Pawtucket	State RI	Zip Code 02862	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	Occupation	0326140 n • Year-to-Date ▼ 2000.00	2000.00  Contribution
B.	Full Name (Last, First, Middle Initial) UNITED FOOD & COMMERCIAL WORKERS INT Mailing Address 1775 K STREET NW  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State DC C C70 Occupation	Zip Code 20006 0003645	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SUBTOTAL of Receipts This Page (optional)	•	7000.00
TOTAL This Period (last page this line number only)	<u> </u>	7000.00

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

Other (specify)

PAGE 7/32 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 17 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 Full Name (Last, First, Middle Initial) A. Democratic National Committee/Federal State Party Acct Date of Receipt Mailing Address 430 South Capitol St., S.E. 26 0.4 2006 City State Zip Code Transaction ID: SA12.7489 Washington DC 20003 Amount of Each Receipt this Period FEC ID number of contributing 1199.72 C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 1728.35 Other (specify) Full Name (Last, First, Middle Initial) B. Democratic Senatorial Campaign Committee Date of Receipt Mailing Address 120 Maryland Avenue NE 0.4 05 2006 City Zip Code State Transaction ID: SA12.7490 Washington DC 20002 Amount of Each Receipt this Period FEC ID number of contributing 80764.00 C C00042366 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General

126135.00

SUBTOTAL of Receipts This Page (optional)	•	81963.72
TOTAL This Period (last page this line number only)	<b>•</b>	81963.72

FOR LINE NUMBER: PAGE 8/32 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 17 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 Full Name (Last, First, Middle Initial) Susann Della Rosa Date of Receipt Mailing Address 60 Don Avenue 0 4 26 2006 City Zip Code State Transaction ID: SA15.7487 Rumford RI 02916 Amount of Each Receipt this Period FEC ID number of contributing C 385.00 federal political committee. Refund FEC conference fee Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 385.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	385.00
TOTAL This Period (last page this line number only)	•	385.00

	STIEDOLE B (I LCI OIIII 3X)	Use seperate schedule(s	)		-OR LINI check or	= NUMBE	:K:			PAGE	9/3	2
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a		23 28b	24	4 Bc	25 29	26 30b
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or	for commercial purposes, other than using the name	e and address of any politica	u com	ım	ittee to s	Olicit cont	ribui	lions tr	om suc	n com	mittee	
$ \rangle$	NAME OF COMMITTEE (In Full)  Rhode Island Democratic State Committee	2										
$\bigvee$	Allode Island Democratic State Committee	<i>;</i>										
Α.	Full Name (Last, First, Middle Initial)					_		-	:SB21	B.75	18	
Λ.	American Express					Date M	of D	isburs		Y	Y Y	Υ
	Mailing Address 300 South Riverside Plaz	za				0 4		2	26	2	žοŏ	5
	,	State Zip Code IL 60606				Amo	unt c	of Each	Disbu	rsemer	nt this I	Period
	Chicago Purpose of Disbursement	IL 60606									875.	33
	Credit card payment							•		-	•	
	Candidate Name				egory/ /pe							
	Senate President	ement For: Primary General Other (specify)										
	State: District:			_								
В.	Full Name (Last, First, Middle Initial) Southwest Airlines						of D	isburs				_
	Mailing Address Theodore Francis Green Airport						М	/ D2	2 6 /	2	ž 0 Ŏ 6	6 Y
	City State Zip Code Warwick RI 02886							Amount of Each Disbursement this Period				
	Purpose of Disbursement Airfare		<u> </u>				•	227.	10			
	Candidate Name				egory/ /pe	- IMEN	10	ITEM]	ı			
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)				[W.E.			ı			
	Full Name (Last, First, Middle Initial)					_			0004	D 75	10.1	
C.	Best Buy					_		isburs	: SB21 ement			V
	Mailing Address 1337 S. Washington Stre	et				0 4			1 ′		ž 0 Ŏ 6	6
	City No Attleboro	State Zip Code MA 02760				Amo	unt c	f Each	Disbu	rsemer	nt this I	Period
	Purpose of Disbursement Communications equipment					<u> </u>					515.	50
	Candidate Name				egory/ /pe							
	Senate President	ement For: Primary General Other (specify)	•			- IMEK		ITEM]				
	State: District:						_					
s	UBTOTAL of Disbursements This Page (optional)				. <b>•</b>						875.	33
Т	OTAL This Period (last page this line number only)				•							

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)		IE NUMBER: PAGE 10 / 32 nly one)					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 22	3 24 25 2 8b 28c 29 3				
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
Rhode Island Democratic State Committee	е							
Full Name (Last, First, Middle Initial)  A. Citizens Bank			<b>Transaction</b> Date of Disb					
Mailing Address One Citizens Plaza			04	05 7 2006				
City Providence	State Zip Code RI 02903		Amount of E	ach Disbursement this Period				
Purpose of Disbursement Wire fee				12.00				
Candidate Name		Category/ Type						
Senate President	ement For:  Primary General  Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) <b>B.</b> Melba DePena			Date of Disb					
Mailing Address 35 Florance Street			04	<sup>D</sup> 26 / Y 2006 Y				
City Providence	State Zip Code RI 02909		Amount of E	ach Disbursement this Period				
Purpose of Disbursement Reimburse office supplies				74.18				
Candidate Name		Category/ Type						
Office Sought:  Senate  President  State:  Disburse	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)  C. Michael Dorsey			Transaction Date of Disb	n ID: SB21B.7522 oursement				
Mailing Address 166 Valley Street			04	26 7 2006				
City Providence	State Zip Code RI 02909		Amount of E	each Disbursement this Period				
Purpose of Disbursement Reimburse office furnishings								
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)							
				857.11				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)		<u> </u>						

S	CHEDULE B (FEC Form 3X)	lise sene	erate schedule(s)			NUMB	ER:		P/	AGE	11/3	32
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)  Rhode Island Democratic State Committee		ss or any pontical	COMMI		onor con	u ibuti	0113 11	om such			
١.	Full Name (Last, First, Middle Initial)								: SB21B	.7521	l	
•	Lacy Dwyer  Mailing Address 47 Wyndham Hill					Date M 0 4	M /		ement	Ž	0 ŏ 6	Y
		01-1-	7'- 0-1-									
	City Middletown	State RI	Zip Code 02842			Amo	unt of	Each	Disburse	ement		-
	Purpose of Disbursement Reimburse office supplies										9.9	99
	Candidate Name			Cate Ty	gory/ pe							
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ccify) ▼									
	State: District:											
3.	Full Name (Last, First, Middle Initial) Anna Gustina							sburs	: SB21B. ement	.7519	9	
	Mailing Address 111 University Avenue					0 <sup>M</sup> 4	M /	D 2	26	ž	0 ŏ 6	Y
	City Buffalo	State NY	Zip Code 14214			Amo	unt of	Each	Disburse	ement	this P	eriod
	Purpose of Disbursement Reimburse office supplies							_			68.7	74
	Candidate Name			Cate	gory/ pe							
	Office Sought:    House   Disburse     Senate     President     State: District:	ement For: Primary Other (spe	General cify) ▼		•							
_	Full Name (Last, First, Middle Initial)								: SB21B	.7549	9	
٠.	Max Pollack Company					M	M /		ement	γΥ	Y	Υ
	Mailing Address 475 Harris Avenue		0 4			26	2	0 ģ 6				
	City Providence	State RI	Zip Code 02909			Amo	unt of	Each	Disburse			
	Purpose of Disbursement Office furniture									240.7	75	
	Candidate Name				gory/ pe							
	Senate President	ement For: Primary Other (spe	General ecify) ▼									
	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				<b>•</b>					3	19.4	8
т.	OTAL This Period (last page this line number only)										•	

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contribution 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  Full Name (Last, First, Middle Initial) Voter Activation Network  Mailing Address 54 Regent Street  City Cambridge  State  Zip Code MA  Amount of Each Disbursement the MA  O2140	
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  Full Name (Last, First, Middle Initial) Voter Activation Network  Mailing Address 54 Regent Street  City State Zip Code Cambridge MA 02140  Purpose of Disbursement Voter file maintenance Candidate Name  Disbursement For: Senate Primary General Other (specify) ▼	
Rhode Island Democratic State Committee  Full Name (Last, First, Middle Initial) Voter Activation Network  Mailing Address 54 Regent Street  City Cambridge Purpose of Disbursement Voter file maintenance Candidate Name  Disbursement For: Senate President  President  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.7492  Date of Disbursement	
A. Voter Activation Network  Mailing Address 54 Regent Street  City State Zip Code Cambridge MA 02140  Purpose of Disbursement Voter file maintenance  Candidate Name  Date of Disbursement  M	
City State Zip Code Cambridge MA 02140  Purpose of Disbursement Voter file maintenance Candidate Name Category/ Type  Office Sought: House Senate Primary General Other (specify) Total Code MA 02140	) 0 6 °
Cambridge MA 02140  Purpose of Disbursement Voter file maintenance  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼	0.6
Voter file maintenance  Candidate Name  Category/ Type  Office Sought:	
Office Sought:  House Senate Primary President  Disbursement For: Primary General Other (specify)	00.00
Senate Primary General President Other (specify) ▼	
State: District:	
Full Name (Last, First, Middle Initial)  B. Voter Activation Network  Transaction ID: SB21B.7493  Date of Disbursement	
Mailing Address 54 Regent Street	ŎŐ6Ÿ
City State Zip Code Amount of Each Disbursement the Cambridge MA 02140	
Voter file maintenance	00.00
Candidate Name  Category/ Type	
Office Sought:  House Senate Primary Office Sought:  Senate Primary Office Sought:  Other (specify)  State:  Disbursement For:  Other (specify)  Other (specify)	

1		
SUBTOTAL of Disbursements This Page (optional)	•	5800.00
TOTAL This Period (last page this line number only)	•	7851.92

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)			NUMBEF	₹:	PA	GE 13	/ 32
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		ck only 21b 27	one) 22 [ 28a [	23 28b	24 28c	25 29	26 X 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam									
$\rangle$	NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee									
۹.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island						ction ID:	: SB30B. ement	7484	
	Mailing Address PO Box 1057					0 4	/ D	0 /	ŽOŎ	6 <sup>Y</sup>
	City Providence	State RI	Zip Code 02901			Amoun	t of Each	Disburse		
	Purpose of Disbursement Health insurance								651	.33
	Candidate Name			Categoi Type	ry/					
	Senate President	ement For: Primary Other (spe	General cify) ▼							
3.	State: District:  Full Name (Last, First, Middle Initial)  Blue Cross Blue Shield of Rhode Island						ction ID:	: SB30B.	7495	
	Mailing Address PO Box 1057					0 4 M	1 / D	0 / 1	Ž 0 Ŏ	6 Y
	City Providence	State RI	Zip Code 02901			Amour	t of Each	Disburse	ment this	Period
	Purpose of Disbursement Dental insurance					L.			34	.16
	Candidate Name			Categor Type	ry/					
	Senate President	ement For: Primary Other (spe	General cify) ▼							
	State: District: Full Name (Last, First, Middle Initial)					Tranca	ection ID:	: SB30B.	7/19/	
С.	Blue Cross Blue Shield of Rhode Island					Date of	Disburs	ement		_ Y
	Mailing Address PO Box 1057					0 4	2	26	Žoŏ	6
	Providence	State RI	Zip Code 02901			Amoun	t of Each	Disburse		
	Purpose of Disbursement Health insurance								651	.33
	Candidate Name			Categoi Type	y/					
	Office Sought:  Senate President  State:  Disburse	ement For: Primary Other (spe	General cify) ▼							
s	UBTOTAL of Disbursements This Page (optional)				<u> </u>				1336	.82
T	OTAL This Period (last page this line number only)				•					

TEMPED DISPURSEMENTS	Use seperate schedule(s)		check or		DEN.	R. PAGE 14					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22		23 28b	24 28c	П	25 29	X	26 30b
Any Information copied from such Reports and Statem	lents may not be sold or used by	y an						contri			300
or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)											
/ Rhode Island Democratic State Committee	3										
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB30B	.749	6		
Blue Cross Blue Shield of Rhode Island				_ N	M	Disburse		ΥΥ	Y	Υ	
Mailing Address PO Box 1057				0	4	2	6 /	2	0 Ď 6		
City Providence	State Zip Code RI 02901			An	ount	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement	NI 02901			1 [					34.1	6	П
Dental insurance			.						-		_
Candidate Name		Cate Ty	gory/ pe								
Office Sought: House Disburse	ment For:										
Senate   President	Primary General Other (specify) ▼										
State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Tra	neac	tion ID:	SB30B	750	0		
3. Citizens Bank						Disburse		., 50	O		
Mailing Address One Citizens Plaza				O <sub>V</sub>	4 M	/ D 1	0 /	y y	0 ŏ 6	Y	
- One Officerts Flaza								_			
City Providence	State Zip Code RI 02903			An	ount	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement	02000	_		1				. 4	1065.1	4	
Payroll tax deposit											
Candidate Name		Cate Ty	gory/ pe								
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Senate	Primary General										
President State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Tra	neac	tion ID:	SB30B	750	1		
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	75.0.4						D:-I				
City Providence	State Zip Code RI 02903			An	ount	of Each	Disburse	emen	t this P	erio	נ
Purpose of Disbursement FUTA deposit	Г	v		1 L					127.2	24	┙
Candidate Name		Cate	gory/								
		Ту									
	ment For:										
Senate President	Primary General Other (specify) ▼										
State: District:	□ 0.1.01 (0p0011)/ <b>▼</b>										
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SUBTOTAL of Disbursements This Page (optional)				L				4	226.5	4	_
TOTAL This Period (last page this line number only)			•		,						

		Use seperate schedule(s)		(check o			٦.		LPA	4GE	15/3		
ıſ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b		22 [	23	_ ∟	24		25		26
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	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam											5	
_	NAME OF COMMITTEE (In Full)												
$\rangle$	Rhode Island Democratic State Committee	е											
	Full Name (Last, First, Middle Initial)					Transa	action	ID:	SB30B	.750	2		
٠.	Department of Employment & Training					Date o				v • v		V	
	Mailing Address One Capitol Hill					0 4		<sup>D</sup> 2	6 /	<u></u>	0 Ó 6		
	City Providence	State Zip Code RI 02908				Amour	nt of Ea	ach I	Disburse	emen	t this F	erio	b
	Purpose of Disbursement	RI 02908	_		_					1	366.3	88	
	State unemployment insurance							-		-	-		
	Candidate Name			egory/ ype									
		ement For:											
	Senate President	Primary General Other (specify) ▼											
	State: District:	Guioi (oposiiy) V											
	Full Name (Last, First, Middle Initial)				٠	Transa	action	ID:	SB30B	.749	7		
3.	Melba DePena					Date o							
	Mailing Address 35 Florance Street					0 4	/	<sup>D</sup> 1	4	ž	0 Ď 6	Υ	
	City Providence	State Zip Code RI 02909				Amour	nt of Ea	ach I	Disburse	emen	t this F	erio	b
	Purpose of Disbursement Net wages									1	321.1	8	
	Candidate Name			egory/ ype									
	Senate President	ement For: 2004 Primary X General Other (specify)											
	State: District:												
Э.	Full Name (Last, First, Middle Initial) Melba DePena					Date o	f Disbi	urse	SB30B ment				
	Mailing Address 35 Florance Street					0 4		<sup>D</sup> 2	8 /	ž	0 Ď 6	Y	
	City Providence	State Zip Code RI 02909				Amour	nt of Ea	ach I	Disburse			-	t
	Purpose of Disbursement Net wages						-				321.1	8	
	Candidate Name			tegory/									
	Senate President	ement For: 2004 Primary X General Other (specify)		-									
	State: District:												_
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Rhod	e Island I	Democratic State C	ommittee	)												
		First, Middle Initial)							Trans	acti	on ID:	SB30E	3.749	9		
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Mailing	g Address	One Capitol Hill							0 4		1	0 /	2	0 Ď 6		
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	Withholding								-	-	-		_	-		
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		Senate President		Primary Other (spe	General											
State:		District:		Other (spe	City) $lacksquare$											
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Mailing	g Address	166 Valley Stree	 ≥t						o <sup>M</sup> 4	М	/ <b>1</b>	<sup>D</sup> /	Y Ž	0 ŏ 6	Υ	
City Provid	dence			State RI	Zip Code 02909				Amou	nt of	f Each	Disburs	emer	t this F	erio	d
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Candio	date Name						tegory/ Type									
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		Senate		Primary	X General											
State:		President District:		Other (spe	cify)											
	ame (Last.	First, Middle Initial)						+	Tuono		an ID:	SB30E	750			
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iviaiiiig	y Address	166 Valley Stre	₽l													
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Office	Sought:	House	Disburse	ment For:	2006		760									
		Senate		Primary	X General											
State:		President District:		Other (spe	cify)											
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	for commercial purposes, other than using the name											
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
/	Rhode Island Democratic State Committee	)										
	Full Name (Last, First, Middle Initial)				Tra	ansac	tion ID:	SB30B	.750	)5		
۱.	Lacy Dwyer					te of I	Disburse		v · v	, , ,	V	
	Mailing Address 47 Wyndham Hill				O	4 "	1	<sup>D</sup> /	2	0 0 6		
	City Middletown	State Zip Code RI 02842			An	nount	of Each	Disburse	emen	t this F	erio	b
	Purpose of Disbursement	RI 02842	т_		- F				-	1169.0	)6	
	Net wages								-	-	-	
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		ement For:	•									
	Senate President	Primary General Other (specify) ▼										
	State: District:	Other (specify)										
	Full Name (Last, First, Middle Initial)				Tra	near	tion ID:	SB30B	750	16		
3.	Lacy Dwyer						Disburse		., 50	,0		
	Mailing Address 47 Wyndham Hill					4 M	/ D2	. B /	Ý ž	0 ŏ 6	Υ	
	City Middletown	State Zip Code RI 02842			An	nount	of Each	Disburs	emen	t this F	erio	b
	Purpose of Disbursement Net wages	020.2			1 L				1	1169.0	)6	
	Candidate Name			tegory/ Type								
	Office Sought: House Disburse	ement For:	<u> </u>	700								
	Senate	Primary General										
	President State: District:	Other (specify)										
	Full Name (Last, First, Middle Initial)				T		4: ID-	CDOOD	755	.0		
).	Regina Fiorentini						Disburse	SB30B ement	.755	00		
	Mailing Address 36 Macon Avenue				- lo	4 M	/ D	. B /	Ý Ž	0 0 6	Υ	
	City Haverhill	State Zip Code MA 01830			An	nount	of Each	Disburs	emen	t this F	erio	b
	Purpose of Disbursement			•	7 L				-	1169.0	)6	
	Net wages Candidate Name		- L	tegory/								
	Caradate Name		1	туре Гуре								
		ement For:										
	Senate President	Primary General Other (specify) ▼										
	State: District:	Carer (Speedly)										
	1										_	$\overline{}$
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T	OTAL This Period (last page this line number only)			•						-		

TEMES DISCUSSION	Use seperate schedule(s)		check or			•		L PF	ME	10/3	_	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b	Ć.	22 [	23		24		25		26
	, ,		27		28a	28b		28c		29	- 1	30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											5	
NAME OF COMMITTEE (In Full)												
Rhode Island Democratic State Committee												
Full Name (Last, First, Middle Initial)				Т	ransa	ction I	D: S	B30B.	750	7		
Anna Gustina					Date of	Disbu			′ Y	Y	Υ	
Mailing Address 111 University Avenue					0 4		14	l L	2	0 Ď 6		
	State Zip Code NY 14214			1	Amoun	t of Ead	ch D	isburse	ment	this P	erio	t
Purpose of Disbursement		U	-	1					1	880.3	5	
Net wages Candidate Name		2 .										
	'		egory/ rpe									
Office Sought: House Disburse Senate	ment For:  Primary General											
President	Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial)  3. Anna Gustina								B30B.	750	8		
Anna Gustina					Date of	Disbui			′ Y	Y	Υ	
Mailing Address 111 University Avenue				l	0 4	l L	2 8	3	2	0 Ď 6		
,	State Zip Code NY 14214			1	Amoun	t of Ead	ch D	isburse	ment	this P	erio	t
Purpose of Disbursement Net wages		-							_ 1	775.7	7	
Candidate Name			egory/ vpe									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial)  Micheal Keane					Date of	Disbu	rsem				14	
Mailing Address 166 Valley Street					04	] / [	14		ž	0 ŏ 6	Y	
,	State Zip Code RI 02909			1	Amoun	t of Ead	ch D	isburse	-		-	t
Purpose of Disbursement Net wages	Г	v							1	333.1	6	
Candidate Name			egory/ /pe									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:												
SUBTOTAL of Disbursements This Page (optional) .		····	. •						49	989.2	8	
TOTAL This Period (last page this line number only)										•		

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S	CHEDULE B (FEC Form 3X)	Use sene	rate schedule(s)		NUMBER: PAGE 19/32
IT	EMIZED DISBURSEMENTS	for each o	eategory of the Summary Page	(check only	y one)  22
	y Information copied from such Reports and Sta for commercial purposes, other than using the n	•			
\	NAME OF COMMITTEE (In Full)				
/	Rhode Island Democratic State Commi	ittee			
	Full Name (Last, First, Middle Initial)				Transaction ID: SB30B.7510
۹.	Micheal Keane				Date of Disbursement
	Mailing Address 166 Valley Street				04
	City Providence	State RI	Zip Code 02909		Amount of Each Disbursement this Period
	Purpose of Disbursement Net wages				1333.16
	Candidate Name			Category/ Type	
	Office Sought: House Disbuter Senate President	ursement For: Primary Other (spec	General cify) ▼		
	State: District:				

SUBTOTAL of Disbursements This Page (optional)	•	1333.16
TOTAL This Period (last page this line number only)	<b>•</b>	24326.20

### SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 20 / 32 FOR LINE 13 OF FORM 3X

	Detailed Summary Pag	le
NAME OF COMMITTEE (In Full)		
Rhode Island Democratic State Committee		
	Trai	saction ID: SC/9.5183
LOAN SOURCE Full Name (Last, First, Middle Initial)		Election:
Licht 88 Committee		Primary
Mailing Address 350 Cole Avenue		General Other (specify) ▼
Mailing Address 350 Cole Avenue		Cirie (specify)
City Providence State RI ZIP Cod	le 02906	
Original Amount of Loan Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
5249.87	0.00	5249.87
3249.01	0.00	3243.87
TERMS		_
Date Incurred Date Due	Interest	Rate Secured:
12 31 1988		% (apr) Yes X No
		/ (цр.)
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Cocapation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
ag , uai ooo	Cooupation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Maining / Add 000	Occupation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Maining / Add 000	Cooupation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
	_	
SUBTOTALS This Period This Page (optional)		5249.87
TOTALS This Period (last page in this line only)	▶ ∟	5249.87
Course outstanding belongs only to LINE 9. Calculute D. favilitie Box V and Och	dula D. aanus famuand ta aara	avanuaita lina of Cumu
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sche	culle D, carry forward to app	propraite line of Summary.

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

	PAGE 21 / 32 FOR LINE 18a OF FORM 3X
	TOTAL AMOUNT TRANSFERRED
6 <sup>Y</sup>	4836.16
	4836.16
	Transaction ID: H3.7486
	Transaction ID:
	Transaction ID:
	Transaction ID:
	Transaction ID:
	Transaction ID:
	Transaction ID:
NEOEN #	Transaction ID:
RECEIV	EU
	1
-	

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 Y Y Y Y Y Y Y Y Y Y Y Y	4836.16
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		4836.16
,		Transaction ID: H3.7486
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		
, , , , , , , , , , , , , , , , , , , ,		Transaction ID:
iv) Direct Fundraising (List Activity or Event Iden	ntifier)	
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundrais  v) Direct Candidate Support (List of Activity or		
V) Direct Candidate Support	Event identifier)	1
a) 		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Candid	date Support	
vi) Public Communications Referring Only to	Party (Made by PAC)	Transaction ID:
TOTALS FO	OR BREAKDOWN OF TRANSFER RECEIVI	
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	y to Party)	
TOTAL This Period (Total Amount Transferred)		

#### (FFC Fo **SCHEDULE H3 TRANSFERS ALLOCATED**

TOTAL This Period (Total Amount Transferred) .....

CHEDULE H3 (FEC FORM 3X) RANSFERS FROM NONFEDERAL AC	COUNTS FOR	
LOCATED FEDERAL / NONFEDERA		PAGE 22/32
		FOR LINE 18a OF FORM
ME OF COMMITTEE (In Full)		
hode Island Democratic State Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non- federal Account	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	12732.07
rederal Account	04 28 2006	12732.07
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		12732.07
		Transaction ID: H3.7485
ii) Generic Voter Drive		
		Transaction ID:
iii) Exempt Activities		
		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identi	ifier)	
		Transaction ID:
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	ng	
v) Direct Candidate Support (List of Activity or Ev	vent Identifier)	
a)		Transaction ID:
a)		Transaction ib.
b)		Transaction ID:
0)		
Total Assessed Transferred For Birest Oard He	de Ouwer d	
c) Total Amount Transferred For Direct Candida	ate Support	
vi) Public Communications Referring Only to Pa	arty (Made by PAC)	
in, rubino communicationo noioning ciny to re	(Made by 1 710)	Transaction ID:
TOTALS FOR	R BREAKDOWN OF TRANSFER RECE	EIVED
	17568.23	
OTAL This Period (Administrative)	17300.23	_
OTAL This Period (Generic Voter Drive)	0.00	
3 : 2::22 (2:2::2::2 : 3.6:: 2::-2)		
OTAL This Period (Exempt Activities)		0.00
		0.00
OTAL This Period (Direct Fundraising)		0.00
OTAL This Period (Direct Candidate Support)		0.00
The Foliot (British Gardinate Support)		
OTAL This Period (Public Communications Referring Only t	o Party)	0.00

17568.23

PAGE	23 / 32			
FOR	LINE	21a	OF	FORM 3X

NAME OF COMMITTEE (In F	Sull\			FOR LINE 21a OF FORM 3X
Rhode Island Democrat	,	20		
Anode Island Democrat	lic State Committe	ee		
A. Full Name (Last, First				Type of Allocated Activity:
Cox Communication	IS			Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P.O. Box 39				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Newark	NJ	07101		Allocated Activity or Event Year-To-Date
Purpose of Disburseme Monthly cable and m			Category/ Type	46734.23
Activity or Event Identific Administrative	er:			Date 0 4 1 0 2 0 0 6  Transaction ID: H4.7476
FEDERA	L SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	44.52		167.48	212.00
B. Full Name (Last, Firs	t, Middle Initial)			Type of Allocated Activity:
Susann Della Rosa				Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
60 Don Avenue				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Rumford	RI	02916		Allocated Activity or Event Year-To-Date
Purpose of Disburseme Accounting Services			Category/ Type	47884.23
Activity or Event Identific Administrative	er:			Date 0 4 1 0 2 0 0 6 Transaction ID: H4.7477
FEDERA	L SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	241.50		908.50	1150.00
C. Full Name (Last, Firs Pui O	t, Middle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address 249 Roosevelt Avenu	ue			Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Pawtucket	RI	02860		Allocated Activity or Event Year-To-Date
Purpose of Disburseme April rent & electricit			Category/ Type	48484.23
Activity or Event Identific Administrative	er:		ј туре	Date 0 4 1 0 2 0 0 6  Transaction ID: H4.7478
FEDERA	L SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	100.00		474.00	000.00
	126.00		474.00	600.00
SUBTOTAL of Allocated Fe	deral and NonFedera	Activity This Page		
FEDERA	L SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	412.02		1549.98	1962.00
	nge for each line only) L SHARE	(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT
			-	

PAGE	2	4/3		
FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Ful Rhode Island Democration		ee		
				True of Allegated Applicati
<b>A.</b> Full Name (Last, First, T-Mobile	iviiddie initial)			Type of Allocated Activity:  Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
PO Box 742596 City	State	Zip Code		Public Comm (ref to party only) by PAC
Cincinnati	ОН	45274		Allocated Activity or Event Year-To-Date
Purpose of Disbursement Cell Phone expense	:		Category/ Type	48553.88
Activity or Event Identifier Administrative				Date 0 4 1 0 2 0 0 6 Transaction ID: H4.7479
FEDERAL	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	14.63		55.02	69.65
<b>B.</b> Full Name (Last, First, Verizon	Middle Initial)			Type of Allocated Activity:
Mailing Address				
P.O. Box 28007			1	Public Comm (ref to party only) by PAC
City Lehigh Valley	State PA	Zip Code 18002		Allocated Activity or Event Year-To-Date
Purpose of Disbursement Telephone service			Category/ Type	48770.69
Activity or Event Identifier Administrative	:		ј Турс	Date 0 4 1 0 2 0 0 6 Transaction ID: H4.7480
FEDERAL	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	45.54		171.27	216.81
C. Full Name (Last, First, W.B. Mason	Middle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address 59 Centre Street				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Brockton Purpose of Disbursement	MA	02303		Allocated Activity or Event Year-To-Date
Office supplies			Category/ Type	48962.79
Activity or Event Identifier Administrative				Date 0 4 1 0 2 0 0 6 Transaction ID: H4.7482
FEDERAL	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	40.35		151.75	192.10
SUBTOTAL of Allocated Fede	eral and NonFedera	l Activity This Page		
FEDERAL	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	100.52		378.04	478.56
TOTAL This Period (last pag FEDERAL		(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

PAGE	2	5/3	32	
FOR	LINE	21a	OF	FORM 3X

NAME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3X
Rhode Island Democratic State Cor	nmittoo		
niloue Islanu Democratic State Col	mmuee		
A. Full Name (Last, First, Middle Initia Silva's Family Florist	l)		Type of Allocated Activity:
Mailing Address			Administrative Fundraising Exempt
328 Warren Avenue			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
East Providence RI	02914		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Sympathy Bouquet		Category/ Type	49157.79
Activity or Event Identifier: Administrative			Date 0.4
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
40.95		154.05	195.00
B. Full Name (Last, First, Middle Initia	I)		Type of Allocated Activity:
Prime Group			Administrative Fundraising Exempt
Mailing Address 815 Connecticut Avenue, NW			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Washington DC	20006		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Polling		Category/ Type	84157.79
Activity or Event Identifier: Administrative		- 7,6-	Date 0 4 1 0 2 0 0 6  Transaction ID: H4.7551
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
7350.00		27650.00	35000.00
C. Full Name (Last, First, Middle Initia VarTec Solutions	I)		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address PO Box 78228			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Phoenix AZ	85062		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Long distance service		Category/ Type	84216.73
Activity or Event Identifier: Administrative		, J <sub> -</sub> -	Date 0 4 2 6 2 0 0 6 Transaction ID: H4.7481
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
12.38		46.56	58.94
SUBTOTAL of Allocated Federal and Non	Federal Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
7403.33	2	27850.61	35253.94
TOTAL This Period (last page for each lin	ne only)(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

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FOR	LINE	21a	OF	FORM 3X

		FOR LINE 21a OF FORM 3X
NAME OF COMMIITTEE (In Full)		
Rhode Island Democratic State Committee		
A. Full Name (Last, First, Middle Initial)		Type of Allocated Activity:
Ikon Financial Services		Administrative Fundraising Exempt
Mailing Address		
PO Box 41564		
City State Zip Code	-	Public Comm (ref to party only) by PAC
Philadelphia PA 19101		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Copier Lease	Category/ Type	84380.44
Activity or Event Identifier: Administrative	1 71	Date 0 4 2 6 2 0 0 6  Transaction ID: H4.7511
FEDERAL SHARE + NONE	FEDERAL SHARE	= TOTAL AMOUNT
34.38	129.33	163.71
B. Full Name (Last, First, Middle Initial) W.B. Mason		Type of Allocated Activity:
Mailing Address		X Administrative Fundraising Exempt
59 Centre Street		Voter Drive Direct Candidate Support
City State Zip Code		Public Comm (ref to party only) by PAC
Brockton MA 02303		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Office supplies	Category/ Type	84412.53
Activity or Event Identifier: Administrative		Date 0 4 2 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE + NONF	FEDERAL SHARE	= TOTAL AMOUNT
6.74	25.35	32.09
C. Full Name (Last, First, Middle Initial)		Type of Allocated Activity:
American Express		Administrative Fundraising Exempt
Mailing Address		Voter Drive Direct Candidate Support
300 South Riverside Plaza City State Zip Code		Public Comm (ref to party only) by PAC
City State Zip Code Chicago IL 60606		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	Category/	84731.79
Credit card payment	Type	
Activity or Event Identifier: Administrative		Date 04 26 2006
TEDEDAL CHARE . NONE	TEDEDAL CHADE	Transaction ID: H4.7513
	FEDERAL SHARE	= TOTAL AMOUNT
67.06	252.20	319.26
SUBTOTAL of Allocated Federal and NonFederal Activity This Page		
FEDERAL SHARE + NONF	FEDERAL SHARE	= TOTAL AMOUNT
108.18	406.88	515.06
TOTAL This Period (last page for each line only)(Federal share to 21	. , . ,	
FEDERAL SHARE NO	NFEDERAL SHARE	TOTAL AMOUNT

PAGE	2	7/3	32	
FOR	LINE	21a	OF	FORM 3X

NAME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3X
WWIL OF GOWNING TEE (IIIT dil)			
Rhode Island Democratic State Committee			
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			1
300 South Riverside Plaza			Voter Drive Direct Candidate Support
City State Zi	ip Code		Public Comm (ref to party only) by PAC
Chicago IL 6	0606	1 1	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Membership Fees		Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]		Турс	Date 0 4 2 6 2 0 0 6  Transaction ID: H4.7523
FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
30.45		114.55	145.00
B. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Bravo Brasserie			Administrative Fundraising Exempt
Mailing Address 123 Empire Street			Voter Drive Direct Candidate Support
	ip Code		Public Comm (ref to party only) by PAC
Providence RI 02	2903		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Meeting with elected officials 3/31/06		Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]			Date 0 4 2 6 2 0 0 6  Transaction ID: H4.7524
FEDERAL SHARE +	NONFEDERAL :	SHARE	= TOTAL AMOUNT
7.77		29.23	37.00
7.77  C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille		29.23	Type of Allocated Activity:
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille		29.23	Type of Allocated Activity:  X Administrative Fundraising Exempt
C. Full Name (Last, First, Middle Initial)		29.23	Type of Allocated Activity:
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place	ip Code	29.23	Type of Allocated Activity:  X Administrative Fundraising Exempt
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi	ip Code 2903	29.23	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi	•	Category/	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier:	•		Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials	•	Category/	Type of Allocated Activity:  X 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
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 02  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative	•	Category/ Type	Type of Allocated Activity:  X 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 0 4 0 3 2 0 0 6
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]	2903	Category/ Type	Type of Allocated Activity:  X 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 0 4 0 3 7 7 7 7 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24	NONFEDERAL	Category/ Type	Type of Allocated Activity:  X 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 0 4 0 3 2 0 0 6  Transaction ID: H4.7525  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24  SUBTOTAL of Allocated Federal and NonFederal Activity	NONFEDERAL :	Category/ Type	Type of Allocated Activity:  X 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 0 4 0 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 02  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24  SUBTOTAL of Allocated Federal and NonFederal Activity FEDERAL SHARE +	NONFEDERAL	Category/ Type  SHARE  23.47	Type of Allocated Activity:  X 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 0 4 0 3 2 0 0 6  Transaction ID: H4.7525  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place City State Zi Providence RI 0:  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24  SUBTOTAL of Allocated Federal and NonFederal Activity	NONFEDERAL :	Category/ Type	Type of Allocated Activity:  X 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 0 4 0 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 02  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24  SUBTOTAL of Allocated Federal and NonFederal Activity FEDERAL SHARE +  0.00	NONFEDERAL : y This Page NONFEDERAL :	Category/ Type  SHARE 23.47  SHARE 0.00  NonFederal sha	Type of Allocated Activity:  X 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 0 4 0 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initial) Joe's American Bar & Grille  Mailing Address 148 Providence Place  City State Zi Providence RI 02  Purpose of Disbursement: Meeting with elected officials  Activity or Event Identifier: Administrative [MEMO ITEM]  FEDERAL SHARE +  6.24  SUBTOTAL of Allocated Federal and NonFederal Activity FEDERAL SHARE +  0.00  TOTAL This Period (last page for each line only)(Federal	NONFEDERAL :  y This Page  NONFEDERAL :  al share to 21(a)(i) and	Category/ Type  SHARE 23.47  SHARE 0.00  NonFederal sha	Type of Allocated Activity:  X 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 0 4 0 3 7 9 9 9 9 9 10 0 6 10 10 10 10 10 10 10 10 10 10 10 10 10

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FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full) Rhode Island Democratic	State Committee			
				Type of Allegated Activity:
<b>A.</b> Full Name (Last, First, N Tokyo Restaurant	iiuule iiillai)			Type of Allocated Activity:  Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
388 Wickenden Street	State	7in Codo	<u> </u>	Public Comm (ref to party only) by PAC
City Providence	RI	Zip Code 02903		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Meeting with elected of	ficials		Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 0 4 0 5 2 0 0 6 Transaction ID: H4.7526
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	8.85		33.25	42.10
<b>B.</b> Full Name (Last, First, M Bravo Brasserie	liddle Initial)			Type of Allocated Activity:
Mailing Address				X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
123 Empire Street				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Providence	RI	02903		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Meeting with elected of	ficials		Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 0 4 1 0 7 2 0 0 6 Transaction ID: H4.7527
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	6.43		24.17	30.60
C. Full Name (Last, First, N Bravo Brasserie	liddle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address 123 Empire Street				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Providence	RI	02903		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Meeting with elected of	ficials		Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 0 4 1 2 2 0 0 6 Transaction ID: H4.7528
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	7.32		27.53	34.85
	1.02		27.00	04.00
SUBTOTAL of Allocated Federa	al and NonFederal Ac	tivity This Page		
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		0.00	0.00
TOTAL This Period (last page FEDERAL SI		deral share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

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FOR	LINE	21a	OF	FORM 3X

I EBEITAE/NOM EB		• •		FOR LINE 21a OF	FORM 3X
NAME OF COMMITTEE (In Full)	1				
Rhode Island Democratic	State Committee	e			
				1=	
A. Full Name (Last, First, N MBNA	/liddle Initial)			Type of Allocated Activity:	
Mailing Address					xempt
P.O. Box 15019				☐ Voter Drive ☐ Direct Candidate Su	upport
City	State	Zip Code		Public Comm (ref to party only) by PAC	
Wilmington	DE	19886		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			Category/	86935.97	
Credit card payment			Type	00000.07	
Activity or Event Identifier: Administrative				Date 0 4 2 6 2 0 0 6  Transaction ID: H4.7514	S <sup>Y</sup>
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT	
	462.90		1741.28	2204.18	
<b>B.</b> Full Name (Last, First, Name) Capital Grille	Middle Initial)			Type of Allocated Activity:	
Mailing Address				Tanimotianio	xempt
One Cookson Place				Voter Drive Direct Candidate Su	upport
City	State	Zip Code		Public Comm (ref to party only) by PAC	
Providence	RI	02903	11 1	Allocated Activity or Event Year-To-Date	_
Purpose of Disbursement: Meeting with elected of	ficials 3/7/06		Category/ Type	0.00	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 0 4 2 6 7 Y Y Y Y Y O D D D D D D D D D D D D D D	S <sup>Y</sup>
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT	
	168.35		633.31	801.66	
C. Full Name (Last, First, N	/liddle Initial)			Type of Allocated Activity:	
Mailing Address				1	xempt
2 Pine Street				Voter Drive Direct Candidate Su	upport
City	State	Zip Code		Public Comm (ref to party only) by PAC	
Providence	RI	02903		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Meeting with elected of	fficials 3/27/06		Category/ Type	0.00	
Activity or Event Identifier:			Туре	M M / D D / Y Y Y	Υ
Administrative				Date 0.4 2.6 2.0 0.6	5
[MEMO ITEM] FEDERAL S	HARE	+ NONFEDERAL	SHARE	Transaction ID: H4.7530  = TOTAL AMOUNT	
T EDET THE O	1 1 1 1	1 NONE EDETINE	1 1 1 1		
	10.49		39.46	49.95	
SUBTOTAL of Allocated Feder	al and NonFederal	Activity This Page			
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT	
	462.90		1741.28	2204.18	
TOTAL This Period (last page	for each line only)(	Enderal share to 21(a)(i) and	NonEndoral cha	re to 21(a)(i))	_
FEDERAL S	• , ,	ederai snare to 21(a)(i) and- NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT	
I EDETAL S	1 17 d 1L	NOM EDEM	- JIII II I	TOTAL AWOUNT	

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I EDERAL/NONI EDERAL ACTIVITI		FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)		,
Rhode Island Democratic State Committee		
A. Full Name (Last, First, Middle Initial) MBNA		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address		
P.O. Box 15019		Voter Drive Direct Candidate Support
City State Zip Code		Public Comm (ref to party only) by PAC
Wilmington DE 19886		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Card fee 3/31/06	Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]		Date 0 4 2 6 2 0 0 6 Transaction ID: H4.7531
FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
8.19	30.81	39.00
<b>B.</b> Full Name (Last, First, Middle Initial) Picture This		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address		Voter Drive Direct Candidate Support
158 Wickenden Street		
City State Zip Code Providence RI 02903	· · ·	Public Comm (ref to party only) by PAC
Providence RI 02903  Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
Appreciation gifts	Category/ Type	0.00
Activity or Event Identifier: Administrative		Date 0 4 2 6 2 0 0 6
[MEMO ITEM]  FEDERAL SHARE + NONFEDERAL:	SHARE	Transaction ID: H4.7552  = TOTAL AMOUNT
162.02	609.49	771.51
C. Full Name (Last, First, Middle Initial) Al Pomodoro Gourmet		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address		
San Salvador		Voter Drive Direct Candidate Support
City State Zip Code		Public Comm (ref to party only) by PAC
San Salvador ZZ		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Travel meals 3/11/06	Category/ Type	0.00
Activity or Event Identifier:	•	Date 0 4 2 6 2 0 0 6
Administrative [MEMO ITEM]		Transaction ID: H4.7553
FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
11.50	43.23	54.73
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		
FEDERAL SHARE NONFEDERAL	L SHAKE	TOTAL AMOUNT

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FOR	LINE	21a	OF	FORM 3X

		FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)		
Rhode Island Democratic State Committee		
A. Full Name (Last, First, Middle Initial) Radisson Plaza Hotel		Type of Allocated Activity:
Mailing Address		Administrative Fundraising Exempt
89 Ave. NTE Y Calle Poniente		Voter Drive Direct Candidate Support
City State Zip Code		Public Comm (ref to party only) by PAC
San Salvador ZZ		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Travel lodging 3/14/06	Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]	1,1,50	Date 0 4 2 6 7 2 0 0 6 Transaction ID: H4.7554
FEDERAL SHARE + NONFEDER	AL SHARE	= TOTAL AMOUNT
96.91	364.55	461.46
<b>B.</b> Full Name (Last, First, Middle Initial) Red Bridge Tavern		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address		Voter Drive Direct Candidate Support
22 Waterman Avenue		
City State Zip Code		Public Comm (ref to party only) by PAC
East Providence RI 02914		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Meeting with elected officials 3/16/06	Category/ Type	0.00
Activity or Event Identifier: Administrative [MEMO ITEM]	Турс	Date 0 4 2 6 Y 2 0 0 6  Transaction ID: H4.7555
FEDERAL SHARE + NONFEDER	AL SHARE	= TOTAL AMOUNT
5.44	20.43	25.87

SUBTOTAL	of Allocated Federal and NonFedera	Activ	vity 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		
	8486.95	] [	31926.79		40413.74		

#### Image# 26930146540

Form/Schedule: **F3XN**Transaction ID:

The loan on Schedule C has no determined due date and no interest rate. Transfers from joint fundraisers are distributed on a different schedule than Memo A's. No other employees worked more than 25% on federal campaigns.