

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="15056.42"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16538.91"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30090.90"/>	<input type="text" value="215179.95"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="46629.81"/>	<input type="text" value="230236.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="34391.80"/>	<input type="text" value="217998.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12238.01"/>	<input type="text" value="12238.01"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5254.47"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period: From: / / To: / /

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	17000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	17000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11052.82
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	28052.82
12. Transfers From Affiliated/Other Party Committees.....	20839.14	130538.32
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).....	0.00	0.00
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	2580.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	9251.76	54008.34
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	9251.76	54008.34
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	30090.90	215179.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20839.14	161171.61

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	1967.72	14700.93
(ii) Non-Federal Share.....	7400.99	55301.76
(b) Other Federal Operating Expenditures	18483.17	114775.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27851.88	184778.44
22. Transfers to Affiliated/Other Party Committees.....	6259.92	31259.92
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	280.00	1960.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34391.80	217998.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26990.81	162696.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	0.00	28052.82
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	28052.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20450.89	129476.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20450.89	129476.68

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

The loan on Schedule C has no interest rate and no determined due date. No employees worked more than 25% on a Federal Campaign.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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

A. Abele, Chris, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1141 N Old World 3rd St

City Milwaukee	State WI	Zip Code 53203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) County of Milwaukee	Occupation (for Individual) Executive
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11AI.31265

Amount of Each Receipt this Period

182.32

Memo Item
Hillary Victory Fund

B. Bank, Joshua, Deane, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 E 66th St

City New York	State NY	Zip Code 10065-6515
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Alloy Entertainment	Occupation (for Individual) Producer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2016

Transaction ID : SA11AI.31266

Amount of Each Receipt this Period

26.64

Memo Item
Hillary Victory Fund

C. Brooks, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11100 Santa Monica Blvd

City Los Angeles	State CA	Zip Code 90025
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Gracie Films	Occupation (for Individual) Writer/Producer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2016

Transaction ID : SA11AI.31267

Amount of Each Receipt this Period

85.07

Memo Item
Hillary Victory Fund

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Messinger, Alida, , ,

Mailing Address PO Box 250

City Afton	State MN	Zip Code 55001
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Community Volunteer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11AL31268

Amount of Each Receipt this Period

12.49

Memo Item
Hillary Victory Fund

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
<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. Democratic Grassroots Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 South Capitol Street SE

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00658476

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2017

Transaction ID : SA12.31242

Amount of Each Receipt this Period
10000.00

Memo Item
Joint Fundraiser Transfer

B. Simon, Deborah, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 Laurelwood

City Carmel	State IN	Zip Code 46032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Self-Employed Philanthropist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

Transaction ID : SA12.31242.0

Amount of Each Receipt this Period
10000.00

Memo Item
Democratic Grassroots Victory Fund

C. Democratic National Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 South Capitol St. SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
87640.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA12.31276

Amount of Each Receipt this Period
2941.17

Memo Item
In-kind -

SUBTOTAL of Receipts This Page (optional).....	12941.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
<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. Democratic National Committee/Federal State Party Acct

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 South Capitol St., S.E.

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1638.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2017

Transaction ID : SA12.31240

Amount of Each Receipt this Period
1638.05

Memo Item
Victory Fund Proceeds

B. HILLARY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5256

City NEW YORK	State NY	Zip Code 10185
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00586537

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
31259.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

Transaction ID : SA12.31246

Amount of Each Receipt this Period
6259.92

Memo Item
Final Transfer

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7897.97
TOTAL This Period (last page this line number only).....▶	20839.14

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Arias, Michelle, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1117 Lonsdale Avenue

City Central Falls State RI Zip Code 02863

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.31224

Amount of Each Disbursement this Period: 406.84

Memo Item

B. Arias, Michelle, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1117 Lonsdale Avenue

City Central Falls State RI Zip Code 02863

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.31230

Amount of Each Disbursement this Period: 820.61

Memo Item

C. Democratic National Committee

Full Name (Last, First, Middle Initial)

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement In-kind -

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2017

FEC Identification Number: C C00010603

Transaction ID : SB21B.31278

Amount of Each Disbursement this Period: 2941.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4168.62

TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Department of Employment & Training

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement
State Unemployment Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2017

FEC Identification Number

C

Transaction ID : SB21B.31238

Amount of Each Disbursement this Period

1209.01

Memo Item

Full Name (Last, First, Middle Initial)

B. Division of Taxation

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement
State Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2017

FEC Identification Number

C

Transaction ID : SB21B.31225

Amount of Each Disbursement this Period

212.68

Memo Item

Full Name (Last, First, Middle Initial)

C. Division of Taxation

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement
State Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2017

FEC Identification Number

C

Transaction ID : SB21B.31231

Amount of Each Disbursement this Period

231.54

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1653.23

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Gooding, Ann, , ,

Mailing Address 265 Narragansett Bay Avenue

City Warwick State RI Zip Code 02889

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 11 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.31219
Amount of Each Disbursement this Period

[REDACTED] 39.32

Memo Item

Full Name (Last, First, Middle Initial)

B. Gooding, Ann, , ,

Mailing Address 265 Narragansett Bay Avenue

City Warwick State RI Zip Code 02889

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.31222
Amount of Each Disbursement this Period

[REDACTED] 1233.73

Memo Item

Full Name (Last, First, Middle Initial)

C. Gooding, Ann, , ,

Mailing Address 265 Narragansett Bay Avenue

City Warwick State RI Zip Code 02889

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.31222
Amount of Each Disbursement this Period

[REDACTED] 1233.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 2506.78

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Internal Revenue Service

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Federal Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2017

FEC Identification Number

C
Transaction ID : SB21B.31233
Amount of Each Disbursement this Period
3430.62

Memo Item

Full Name (Last, First, Middle Initial)

B. Lehigh Realty

Mailing Address One Realty Way

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Rent and Cam

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2017

FEC Identification Number

C
Transaction ID : SB21B.31220
Amount of Each Disbursement this Period
1005.33

Memo Item

Full Name (Last, First, Middle Initial)

C. Lis, Jakub, , ,

Mailing Address 95 Ballard Dr.

City West Hartford State CT Zip Code 06119

Purpose of Disbursement
Net Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2017

FEC Identification Number

C
Transaction ID : SB21B.31223
Amount of Each Disbursement this Period
966.07

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5402.02

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Lis, Jakub, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 95 Ballard Dr.

City West Hartford State CT Zip Code 06119

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.31227

Amount of Each Disbursement this Period: 966.07

Memo Item

B. Olasanoye, Tolaulope Kevin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 394 Plainfield Street

City Providence State RI Zip Code 02909

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.31221

Amount of Each Disbursement this Period: 1740.72

Memo Item

C. Olasanoye, Tolaulope Kevin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 394 Plainfield Street

City Providence State RI Zip Code 02909

Purpose of Disbursement Net Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.31225

Amount of Each Disbursement this Period: 1740.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4447.51

TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Olasanoye, Tolaulope Kevin, , ,

Mailing Address 394 Plainfield Street

City Providence State RI Zip Code 02909

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B.31236
Amount of Each Disbursement this Period
305.01

Memo Item

Full Name (Last, First, Middle Initial)

B. HealthSource RI

Mailing Address PO Box 9711

City Providence State RI Zip Code 02940

Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.31236
Amount of Each Disbursement this Period
305.01

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

305.01
18483.17

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Democratic National Committee

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

City Washington State DC Zip Code 20003

Purpose of Disbursement Transfer

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 03 / 2017

FEC Identification Number: C 00010603
Transaction ID : SB22.31247
Amount of Each Disbursement this Period: 6259.92

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C
Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C
Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6259.92
TOTAL This Period (last page this line number only).....▶	6259.92

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. WHITEHOUSE FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 40280

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement
Rent and CAM

Candidate Name
WHITEHOUSE, SHELDON II, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: RI District: 00

Date of Disbursement: 10 / 11 / 2017

FEC Identification Number: C S6R100221
Transaction ID : SB23.31261
Amount of Each Disbursement this Period: 280.00

Memo Item

B. Lehigh Realty

Full Name (Last, First, Middle Initial)
Mailing Address One Realty Way

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Rent and Caam

Candidate Name
WHITEHOUSE, SHELDON II, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: RI District: 00

Date of Disbursement: 10 / 11 / 2017

FEC Identification Number: C S6R100221
Transaction ID : SB23.31261.0
Amount of Each Disbursement this Period: 280.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	280.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Rhode Island Democratic State Committee** Transaction ID : **SC/9.5183**

LOAN SOURCE Full Name (Last, First, Middle Initial) Licht 88 Committee		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 350 Cole Avenue			
City Providence	State RI	ZIP Code 02906	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5249.87	0.00	5249.87

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 12 / 31 / 1988	MM / DD / YYYY	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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 20 OF 29
	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 WHITEHOUSE, SHELDON II, , ,			Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address PO BOX 40280			
City PROVIDENCE	State RI	Zip Code 02940	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 15 / 2017	9251.76

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	9251.76
Transaction ID : H3.31244	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	9251.76
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).....	9251.76

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31203** Memo Item

Staples

Mailing Address 551 North Main Street

City Providence State RI Zip Code 02906

Purpose of Disbursement: Office Supplies

Activity or Event Identifier: Administrative

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 60873.62

Date: 10 / 03 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.32		189.32		239.64

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31204** Memo Item

Amazon.com

Mailing Address 1516 Second Avenue

City Seattle State WA Zip Code 98144

Purpose of Disbursement: Office Supplies

Activity or Event Identifier: Administrative

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 60885.38

Date: 10 / 10 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.47		9.29		11.76

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31205** Memo Item

Rio Suites

Mailing Address 3700 W. Flamingo Road

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement: Lodging Deposit Refund

Activity or Event Identifier: Administrative

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 60615.54

Date: 10 / 10 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
- 56.67		- 213.17		- 269.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
- 3.88		- 14.56		- 18.44

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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.31206 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Cox Communications Mailing Address PO Box 78000			Allocated Activity or Event Year-To-Date 60862.75			
City Detroit	State MI	Zip Code 48278	Date: MM / DD / YYYY 10 / 11 / 2017			
Purpose of Disbursement: Internet, Phone, Cable		Category/ Type	Allocated Activity or Event Year-To-Date 60862.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 11 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
51.91			195.30			247.21

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31207 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Della Rosa, Susann, , , Mailing Address 60 Don Avenue			Allocated Activity or Event Year-To-Date 62162.75			
City Rumford	State RI	Zip Code 02916	Date: MM / DD / YYYY 10 / 11 / 2017			
Purpose of Disbursement: Accounting Services (Non-Employee)		Category/ Type	Allocated Activity or Event Year-To-Date 62162.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 11 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
273.00			1027.00			1300.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31208 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
M.P. Cleaning Services Mailing Address 60 Aberdeen Avenue			Allocated Activity or Event Year-To-Date 62272.75			
City Warwick	State RI	Zip Code 02888	Date: MM / DD / YYYY 10 / 11 / 2017			
Purpose of Disbursement: Office Maintenance		Category/ Type	Allocated Activity or Event Year-To-Date 62272.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 11 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
23.10			86.90			110.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.01		1309.20		1657.21

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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31209** Memo Item
Della Rosa, Susann, , ,
 Mailing Address 60 Don Avenue
 City Rumford State RI Zip Code 02916
 Purpose of Disbursement: Reimbursement
 Activity or Event Identifier: **Administrative**
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 62465.32
 Date: 10 / 11 / 2017
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 40.44 + 152.13 = 192.57

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31248** Memo Item
Rigatoni's Restaurant
 Mailing Address 1229 Warwick Avenue
 City Warwick State RI Zip Code 02888
 Purpose of Disbursement: Food
 Activity or Event Identifier: Administrative
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 0.00
 Date: 10 / 08 / 2017
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 40.44 + 152.13 = 192.57

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.31211** Memo Item
RICOH USA, Inc.
 Mailing Address Five Dedrick Place
 City West Caldwell State NJ Zip Code 07006
 Purpose of Disbursement: Copier Maintenance
 Activity or Event Identifier: Administrative
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 62849.65
 Date: 10 / 11 / 2017
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 80.71 + 303.62 = 384.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.15		455.75		576.90

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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.31212 Memo Item

Lehigh Realty

Mailing Address One Realty Way

City East Providence State RI Zip Code 02914

Purpose of Disbursement: Utilities

Activity or Event Identifier: Administrative

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date 62918.01

Date 10 / 11 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.36		54.00		68.36

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31245 Memo Item

CitiBusiness Card

Mailing Address PO Box 182564

City Columbus State OH Zip Code 43210

Purpose of Disbursement: Credit Card Payment

Activity or Event Identifier: Administrative

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date 64257.61

Date 10 / 11 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
281.62		1057.98		1339.60

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31250 Memo Item

Camille's

Mailing Address 71 Bradford Street

City Providence State RI Zip Code 02903

Purpose of Disbursement: Meals

Activity or Event Identifier: Administrative

Allocated Activity or Event: 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 06 / 26 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.00		529.00		670.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
295.98		1111.98		1407.96

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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.31251 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Chapel Grille Mailing Address 3000 Chapel View Boulevard			Allocated Activity or Event Year-To-Date 0.00			
City Cranston	State RI	Zip Code 02920	Date <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Meals		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="39.48"/>			<input type="text" value="148.52"/>			<input type="text" value="188.00"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31252 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
CitiBusiness Card Mailing Address PO Box 182564			Allocated Activity or Event Year-To-Date 0.00			
City Columbus	State OH	Zip Code 43210	Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Fees		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="17.14"/>			<input type="text" value="64.46"/>			<input type="text" value="81.60"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31254 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Hanley's Ale House Mailing Address 52 Pine Street			Allocated Activity or Event Year-To-Date 0.00			
City Providence	State RI	Zip Code 02903	Date <input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Meals		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="21.00"/>			<input type="text" value="79.00"/>			<input type="text" value="100.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.31255 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Hanley's Ale House Mailing Address 52 Pine Street			Allocated Activity or Event Year-To-Date 0.00			
City Providence	State RI	Zip Code 02903	Date <input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Meals		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="31.50"/>			<input type="text" value="118.50"/>			<input type="text" value="150.00"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31257 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Coal Fire Pizza Mailing Address 385 Westminster Street			Allocated Activity or Event Year-To-Date 0.00			
City Providence	State RI	Zip Code 02903	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Meals		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="15.75"/>			<input type="text" value="59.25"/>			<input type="text" value="75.00"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31259 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
1149 Restaurant Mailing Address 1149 Division Street			Allocated Activity or Event Year-To-Date 0.00			
City EAsT Greenwich	State RI	Zip Code 02818	Date <input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2017"/>			
Purpose of Disbursement: Meals		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2017"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="15.75"/>			<input type="text" value="59.25"/>			<input type="text" value="75.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.31263 Andrews, Julie, , , Mailing Address 294 Wayland Avenue City Providence State RI Zip Code 02906 Purpose of Disbursement: Fundraising Consultant (Non-event) Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 68257.61 Date 10/11/2017 FEDERAL SHARE 840.00 NONFEDERAL SHARE 3160.00 TOTAL AMOUNT 4000.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.31213 PMA Engineering Mailing Address 681 Killingly Street City Johnston State RI Zip Code 02919 Purpose of Disbursement: Equipment Rental Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 68466.26 Date 10/15/2017 FEDERAL SHARE 43.82 NONFEDERAL SHARE 164.83 TOTAL AMOUNT 208.65

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.31217 Best Buy Mailing Address 24 Universal Boulevard City Warwick State RI Zip Code 02886 Purpose of Disbursement: Office Supplies Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 68540.09 Date 10/16/2017 FEDERAL SHARE 15.50 NONFEDERAL SHARE 58.33 TOTAL AMOUNT 73.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 899.32, 3383.16, 4282.48

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.31214 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Bally Hotel Mailing Address 3645 Las Vegas Blvd South			Allocated Activity or Event Year-To-Date 68764.59			
City Las Vegas	State NV	Zip Code 89109	Date: MM / DD / YYYY 10 / 19 / 2017			
Purpose of Disbursement: Lodging Deposit		Category/ Type	Allocated Activity or Event Year-To-Date 68764.59			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 19 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
47.14			177.36			224.50

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31216 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Bally Hotel Mailing Address 3645 Las Vegas Blvd South			Allocated Activity or Event Year-To-Date 69383.64			
City Las Vegas	State NV	Zip Code 89109	Date: MM / DD / YYYY 10 / 19 / 2017			
Purpose of Disbursement: Lodging		Category/ Type	Allocated Activity or Event Year-To-Date 69383.64			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 19 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
130.00			489.05			619.05

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31232 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Bally Hotel Mailing Address 3645 Las Vegas Blvd South			Allocated Activity or Event Year-To-Date 70002.69			
City Las Vegas	State NV	Zip Code 89109	Date: MM / DD / YYYY 10 / 19 / 2017			
Purpose of Disbursement: Lodging		Category/ Type	Allocated Activity or Event Year-To-Date 70002.69			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 19 / 2017			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
130.00			489.05			619.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
307.14		1155.46		1462.60

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
1967.72	7400.99	9368.71