

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 COSTA FOR SENATE

ADDRESS (number and street) 70 EVERETT AVE BRISTOL RI 02809 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00883611 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT RI 00

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 09 / 10 / 2024 in the State of RI (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / 2024 in the State of

5. Covering Period 07 / 01 / 2024 through 08 / 21 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lezon, Dawn, , , Signature of Treasurer Lezon, Dawn, , , Date 08 / 28 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name
COSTA FOR SENATE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<input type="text" value="37336.34"/>	<input type="text" value="37336.34"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="37336.34"/>	<input type="text" value="37336.34"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="36238.73"/>	<input type="text" value="36238.73"/>
(b) Total Offsets to Operating Expenditures (from Line 14)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	<input type="text" value="36238.73"/>	<input type="text" value="36238.73"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<input type="text" value="201097.61"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="200000.00"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

COSTA FOR SENATE

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2024 To: M M / D D / Y Y Y Y 08 / 21 / 2024

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	35.00	35.00
(iii) TOTAL of contributions from individuals ▶	35.00	35.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	37301.34	37301.34
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	37336.34	37336.34
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	200000.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	200000.00	200000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	237336.34	237336.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36238.73	36238.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	36238.73	36238.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	237336.34
25. SUBTOTAL (add Line 23 and Line 24).....	237336.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36238.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	201097.61

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL State RI Zip Code 02809

FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self Occupation Candidate

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.94

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2024

Transaction ID : SA11D.4115

Amount of Each Receipt this Period
209.94

Memo Item
In-kind - Office Supplies

B. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL State RI Zip Code 02809

FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self Occupation Candidate

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4209.94

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 08 / 2024

Transaction ID : SA11D.4118

Amount of Each Receipt this Period
4000.00

Memo Item
In-kind - Signature Collection

C. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL State RI Zip Code 02809

FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self Occupation Candidate

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4503.47

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2024

Transaction ID : SA11D.4120

Amount of Each Receipt this Period
293.53

Memo Item
In-kind - Website Hosting

SUBTOTAL of Receipts This Page (optional)..... ▶ 4503.47

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 21	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10527.47

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 18 / 2024

Transaction ID : SA11D.4119

Amount of Each Receipt this Period
6024.00

Memo Item
In-kind - Signature Collection

B. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10627.47

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11D.4101

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10995.96

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11D.4121

Amount of Each Receipt this Period
368.49

Memo Item
In-kind - Print Advertising

SUBTOTAL of Receipts This Page (optional)..... ▶	6492.49
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 21	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2024	
Mailing Address 70 EVERETT AVE		Transaction ID : SA11D.4123	
City BRISTOL	State RI	Zip Code 02809	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S4RI00119		Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Candidate		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 11095.96		
		<input type="checkbox"/> Memo Item In-kind - USPS Box Rental	

B. Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,		Date of Receipt M M / D D / Y Y Y Y Y 08 / 02 / 2024	
Mailing Address 70 EVERETT AVE		Transaction ID : SA11D.4124	
City BRISTOL	State RI	Zip Code 02809	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S4RI00119		Amount of Each Receipt this Period 1125.00	
Name of Employer Self	Occupation Candidate		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 12220.96		
		<input type="checkbox"/> Memo Item In-kind - Ad Design	

C. Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,		Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2024	
Mailing Address 70 EVERETT AVE		Transaction ID : SA11D.4125	
City BRISTOL	State RI	Zip Code 02809	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S4RI00119		Amount of Each Receipt this Period 7700.00	
Name of Employer Self	Occupation Candidate		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 19920.96		
		<input type="checkbox"/> Memo Item In-kind - Radio Advertising	

SUBTOTAL of Receipts This Page (optional)..... ▶	8925.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 21	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
27066.58

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 12 / 2024

Transaction ID : SA11D.4126

Amount of Each Receipt this Period
7145.62

Memo Item
In-kind - Billboard Advertising

B. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
30255.08

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 13 / 2024

Transaction ID : SA11D.4127

Amount of Each Receipt this Period
3188.50

Memo Item
In-kind - Radio Advertising

C. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL	State RI	Zip Code 02809
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FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self	Occupation Candidate
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
31255.08

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11D.4102

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	11334.12
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 21	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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) COSTA FOR SENATE
--

Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,	
Mailing Address 70 EVERETT AVE	
City BRISTOL	State RI
Zip Code 02809	
FEC ID number of contributing federal political committee. C S4RI00119	
Name of Employer Self	Occupation Candidate
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 234838.34

Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2024
Transaction ID : SA11D.4128
Amount of Each Receipt this Period 3375.00
<input type="checkbox"/> Memo Item In-kind - Ad Design

Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,	
Mailing Address 70 EVERETT AVE	
City BRISTOL	State RI
Zip Code 02809	
FEC ID number of contributing federal political committee. C S4RI00119	
Name of Employer Self	Occupation Candidate
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 231463.34

Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2024
Transaction ID : SA11D.4128
Amount of Each Receipt this Period 208.26
<input type="checkbox"/> Memo Item In-kind - Digital Advertising

Full Name (Last, First, Middle Initial) COSTA, MICHAEL J, ,	
Mailing Address 70 EVERETT AVE	
City BRISTOL	State RI
Zip Code 02809	
FEC ID number of contributing federal political committee. C S4RI00119	
Name of Employer Self	Occupation Candidate
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 234938.34

Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2024
Transaction ID : SA11D.4130
Amount of Each Receipt this Period 100.00
<input type="checkbox"/> Memo Item In-kind - Digital Advertising

SUBTOTAL of Receipts This Page (optional)..... ▶	3683.26
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, , ,

Mailing Address 70 EVERETT AVE

City BRISTOL State RI Zip Code 02809

FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self Occupation Candidate

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
237301.34

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 21 2024

Transaction ID : SA11D.4143

Amount of Each Receipt this Period
2363.00

Memo Item
In-kind - Radio Advertising

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2363.00
TOTAL This Period (last page this line number only).....▶	37301.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

A. Full Name (Last, First, Middle Initial)
COSTA, MICHAEL J, ,

Mailing Address 70 EVERETT AVE

City BRISTOL State RI Zip Code 02809

FEC ID number of contributing federal political committee. **C** S4RI00119

Name of Employer Self Occupation Candidate

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
231255.08

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 20 / 2024

Transaction ID : SA13A.4100

Amount of Each Receipt this Period
200000.00

Memo Item
Personal Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200000.00
TOTAL This Period (last page this line number only).....▶	200000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 209.94	
Purpose of Disbursement In-kind - Office Supplies		Category/ Type	Transaction ID : SB17.4117	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) B. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement In-kind - Signature Collection		Category/ Type	Transaction ID : SB17.4142	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) C. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 293.53	
Purpose of Disbursement In-kind - Website Hosting		Category/ Type	Transaction ID : SB17.4140	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

SUBTOTAL of Disbursements This Page (optional).....▶	4503.47
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 07 / 18 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 6024.00	
Purpose of Disbursement In-kind - Signature Collection		Category/ Type	Transaction ID : SB17.4141	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) B. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 07 / 23 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 368.49	
Purpose of Disbursement In-kind - Print Advertising		Category/ Type	Transaction ID : SB17.4139	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) C. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 07 / 25 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement In-kind - USPS Box Rental		Category/ Type	Transaction ID : SB17.4138	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

SUBTOTAL of Disbursements This Page (optional).....▶	6492.49
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 08 / 02 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 1125.00	
Purpose of Disbursement In-kind - Ad Design		Category/ Type	Transaction ID : SB17.4137	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) B. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 08 / 09 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 7700.00	
Purpose of Disbursement In-kind - Radio Advertising		Category/ Type	Transaction ID : SB17.4136	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) C. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 08 / 12 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 7145.62	
Purpose of Disbursement In-kind - Billboard Advertising		Category/ Type	Transaction ID : SB17.4135	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

SUBTOTAL of Disbursements This Page (optional).....▶	15970.62
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 3188.50	
Purpose of Disbursement In-kind - Radio Advertising		Category/ Type	Transaction ID : SB17.4134	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: RI District: 00				

Full Name (Last, First, Middle Initial) B. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 208.26	
Purpose of Disbursement In-kind - Digital Advertising		Category/ Type	Transaction ID : SB17.4132	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: RI District: 00				

Full Name (Last, First, Middle Initial) C. COSTA, MICHAEL J, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 3375.00	
Purpose of Disbursement In-kind - Ad Design		Category/ Type	Transaction ID : SB17.4133	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: RI District: 00				

SUBTOTAL of Disbursements This Page (optional).....▶	6771.76
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 08 / 21 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement In-kind - Digital Advertising		Category/ Type	Transaction ID : SB17.4131	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) B. COSTA, MICHAEL J, , ,			Date of Disbursement MM / DD / YYYY 08 / 21 / 2024	
Mailing Address 70 EVERETT AVE			FEC Identification Number C S4RI00119	
City BRISTOL	State RI	Zip Code 02809	Amount of Each Disbursement this Period 2363.00	
Purpose of Disbursement In-kind - Radio Advertising		Category/ Type	Transaction ID : SB17.4144	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: RI District: 00		

Full Name (Last, First, Middle Initial) C. Cumulus Providence			Date of Disbursement MM / DD / YYYY 08 / 09 / 2024	
Mailing Address 1502 Wampanoag Trl			FEC Identification Number C	
City Riverside	State RI	Zip Code 02915	Amount of Each Disbursement this Period 7700.00	
Purpose of Disbursement Candidate In-Kind Radio Advertising		Category/ Type	Transaction ID : SB17.4158	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2463.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Candidate In-Kind Digital Advertising

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 20 / 2024

FEC Identification Number
C

Amount of Each Disbursement this Period
208.26

Transaction ID : SB17.4165

Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Candidate In-Kind Digital Advertising

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 21 / 2024

FEC Identification Number
C

Amount of Each Disbursement this Period
100.00

Transaction ID : SB17.4167

Memo Item

Full Name (Last, First, Middle Initial)

C. Flutter and Mose

Mailing Address 24611 136th Ave

City Rosedale State NY Zip Code 11422

Purpose of Disbursement
Candidate In-Kind Ad Design

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 02 / 2024

FEC Identification Number
C

Amount of Each Disbursement this Period
1125.00

Transaction ID : SB17.4156

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial)

A. Flutter and Mose

Mailing Address 24611 136th Ave

City Rosedale State NY Zip Code 11422

Purpose of Disbursement Candidate In-Kind Ad Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3375.00

Transaction ID : SB17.4164

Memo Item

Full Name (Last, First, Middle Initial)

B. iHeart Media

Mailing Address 20880 Stone Oak Pkwy

City San Antonio State TX Zip Code 78258

Purpose of Disbursement Candidate In-Kind Radio Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 2363.00

Transaction ID : SB17.4168

Memo Item

Full Name (Last, First, Middle Initial)

C. Lamar Advertising Co

Mailing Address 5321 Corporate Blvd

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement Candidate In-Kind Billboard Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 7145.62

Transaction ID : SB17.4160

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. New England Petition LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2024	
Mailing Address 188 Main St Unit 205			FEC Identification Number C	
City Wilmington	State MA	Zip Code 01887	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Candidate In-Kind Signature Collection			Transaction ID : SB17.4146	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. New England Petition LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2024	
Mailing Address 188 Main St Unit 205			FEC Identification Number C	
City Wilmington	State MA	Zip Code 01887	Amount of Each Disbursement this Period 6024.00	
Purpose of Disbursement Candidate In-Kind Signature Collection			Transaction ID : SB17.4148	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Squarespace			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2024	
Mailing Address 8 Clarkson St			FEC Identification Number C	
City New York	State NY	Zip Code 10014	Amount of Each Disbursement this Period 293.53	
Purpose of Disbursement Candidate In-Kind Website Hosting			Transaction ID : SB17.4153	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COSTA FOR SENATE

Full Name (Last, First, Middle Initial) A. Vistaprint			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2024	
Mailing Address 95 Hayden Ave			FEC Identification Number C	
City Lexington	State MA	Zip Code 02421	Amount of Each Disbursement this Period 368.49	
Purpose of Disbursement Candidate In-Kind Print Advertising		Category/ Type	Transaction ID : SB17.4154	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WNBH WCTK			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2024	
Mailing Address 888 Purchase St Ste 221			FEC Identification Number C	
City New Bedford	State MA	Zip Code 02740	Amount of Each Disbursement this Period 3188.50	
Purpose of Disbursement Candidate In-Kind Radio Advertising		Category/ Type	Transaction ID : SB17.4162	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	36201.34

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **COSTA FOR SENATE** Transaction ID : **SC/10.4100**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
COSTA, MICHAEL J, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 70 EVERETT AVE			<input type="checkbox"/> General
City BRISTOL		State RI	ZIP Code 02809
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	200000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	08 / 20 / 2024	On Demand	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:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	200000.00
TOTALS This Period (last page in this line only).....▶	200000.00

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