

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
Rhode Island Democratic State Committee

ADDRESS (number and street) P.O. Box 6004
Check if different than previously reported. (ACC) Providence RI 02940

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00136200 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2013 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2013

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 Jeffrey Padwa

Signature of Treasurer Jeffrey Padwa [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2013"/>	<input type="text" value="9394.31"/>	<input type="text" value="9394.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9822.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="34414.55"/>	<input type="text" value="203007.95"/>
(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="44237.25"/>	<input type="text" value="212402.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14288.44"/>	<input type="text" value="182453.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29948.81"/>	<input type="text" value="29948.81"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Rhode Island Democratic State Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 12 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

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	5000.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	5100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	30004.25
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12000.00	35104.25
12. Transfers From Affiliated/Other Party Committees.....	18220.00	103640.00
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	3469.77
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	1485.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	4194.55	59308.58
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	4194.55	59308.58
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	34414.55	203007.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30220.00	143699.37

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	1363.60	16775.75
(ii) Non-Federal Share.....	5050.57	58059.93
(b) Other Federal Operating Expenditures	8924.27	102409.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15338.44	177245.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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	-1050.00	5208.15
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	-1050.00	5208.15
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14288.44	182453.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9237.87	124393.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12000.00	35104.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12000.00	35104.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10287.87	119185.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3469.77
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10287.87	115715.60

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <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 type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. International Brotherhood of Electrical Workers		Date of Receipt
Mailing Address 900 Seventh Street NW		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. C C00027342		Transaction ID : SA11C.21537
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA		Date of Receipt
Mailing Address 905 16th Street NW Second Floor		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. C C00007922		Transaction ID : SA11C.21493
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)		Date of Receipt
Mailing Address 33 ELMCROFT AVENUE		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
PROVIDENCE	RI	02908
FEC ID number of contributing federal political committee. C C00397067		Transaction ID : SA11C.21569
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="2000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="12000.00"/>

**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 8 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

Full Name (Last, First, Middle Initial)
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	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2013

Transaction ID : SA12.21495

Amount of Each Receipt this Period
5000.00

Transfer

B. Democratic National Committee

Full Name (Last, First, Middle Initial)
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	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
93640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

Transaction ID : SA12.21566

Amount of Each Receipt this Period
3220.00

In-kind - Voter File Access

C. REED COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 8628

City CRANSTON	State RI	Zip Code 02920
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238907

Name of Employer	Occupation
------------------	------------

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
12	/	03	/	2013

Transaction ID : SA12.21531

Amount of Each Receipt this Period
10000.00

Transfer

SUBTOTAL of Receipts This Page (optional).....▶	18220.00
TOTAL This Period (last page this line number only).....▶	18220.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Blue Cross Blue Shield of Rhode Island

Mailing Address PO Box 1057

City Providence State RI Zip Code 02901

Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2013

Transaction ID : SB21B.21506

Amount of Each Disbursement this Period

1861.56

Full Name (Last, First, Middle Initial)

B. Jonathan Boucher

Mailing Address 23 Perkins Street

City Warwick State RI Zip Code 02886

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 M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2013

Transaction ID : SB21B.21507

Amount of Each Disbursement this Period

1483.40

Full Name (Last, First, Middle Initial)

C. Susann Della Rosa

Mailing Address 60 Don Avenue

City Rumford State RI Zip Code 02916

Purpose of Disbursement
Accounting Services - Non Employee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2013

Transaction ID : SB21B.21508

Amount of Each Disbursement this Period

1625.00

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

4969.96

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

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**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

A. Democratic National Committee

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-kind - Voter File Access

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2013			

Transaction ID : SB21B.21567

Amount of Each Disbursement this Period

3220.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2013			

Transaction ID : SB21B.21509

Amount of Each Disbursement this Period

78.12

Full Name (Last, First, Middle Initial)

C. United States Treasury

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Federal Withholding tax deposit

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
12			16			2013			

Transaction ID : SB21B.21510

Amount of Each Disbursement this Period

656.19

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

3954.31

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

8924.27

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

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

Full Name (Last, First, Middle Initial)

A. Anthony Alcantara

Mailing Address 17 Waverly St.

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.21511

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Jeremy Alves

Mailing Address 33 Derby Street

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement
Canvass Stipend State Date

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.21512

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jeidy Chamorro

Mailing Address 120 Waldo St.

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.21514

Amount of Each Disbursement this Period

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

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

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

Full Name (Last, First, Middle Initial)

A. Chessie Cserr

Mailing Address 5 Linden Dr.

City Providence State RI Zip Code 02906

Purpose of Disbursement
Canvass Stipend - State Date

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SB30B.21513

Amount of Each Disbursement this Period

-75.00

Full Name (Last, First, Middle Initial)

B. Hannah Farmer

Mailing Address 24 Jane Lane

City Bristol State RI Zip Code 02809

Purpose of Disbursement
Canvass Stipend State Date

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SB30B.21515

Amount of Each Disbursement this Period

-75.00

Full Name (Last, First, Middle Initial)

C. Kimberlee Ferreras

Mailing Address 17 Waverly St.

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SB30B.21516

Amount of Each Disbursement this Period

-75.00

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

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

-225.00

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

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

Full Name (Last, First, Middle Initial)

A. Frantz Gabriel

Mailing Address 66 Curtis St.

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Canvass Stipend Stale Date

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : SB30B.21517

Amount of Each Disbursement this Period

-25.00

Full Name (Last, First, Middle Initial)

B. Abdul-Basit Laural

Mailing Address 255 Providence Ave.

City Riverside State RI Zip Code 02915

Purpose of Disbursement
Canvass Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : SB30B.21518

Amount of Each Disbursement this Period

-25.00

Full Name (Last, First, Middle Initial)

C. Randy Lewis

Mailing Address 187 Leonard Ave

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Canvass Stipend Stale Date

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : SB30B.21519

Amount of Each Disbursement this Period

-25.00

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

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

-75.00

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

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

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

Full Name (Last, First, Middle Initial)

A. Marciely Mata

Mailing Address 119 Adelaide Ave.

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

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
12			31			2013			

Transaction ID : SB30B.21520

Amount of Each Disbursement this Period

-25.00

Full Name (Last, First, Middle Initial)

B. Paola Moreno

Mailing Address 321 Willard Ave

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

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
12			31			2013			

Transaction ID : SB30B.21521

Amount of Each Disbursement this Period

-100.00

Full Name (Last, First, Middle Initial)

C. Hannah Nauen

Mailing Address 69 Brown Street
Box 2470

City Providence State RI Zip Code 02912

Purpose of Disbursement
Canvass Stipend State Date

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
12			31			2013			

Transaction ID : SB30B.21522

Amount of Each Disbursement this Period

-75.00

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

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

-200.00

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

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

Full Name (Last, First, Middle Initial)

A. Joel Olaoye

Mailing Address 400 Mineral Spring Ave, Apt. 30

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21523

Amount of Each Disbursement this Period

-75.00

Full Name (Last, First, Middle Initial)

B. Betty Reyes

Mailing Address 202 High St.

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21524

Amount of Each Disbursement this Period

-25.00

Full Name (Last, First, Middle Initial)

C. Emily Reyes

Mailing Address 12 Waverly St.

City Providence State RI Zip Code 02907

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21525

Amount of Each Disbursement this Period

-75.00

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

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

-175.00

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

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

Full Name (Last, First, Middle Initial)

A. Raekwon Shepard

Mailing Address 80 Eighth St.

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21526

Amount of Each Disbursement this Period

-25.00

Full Name (Last, First, Middle Initial)

B. Sunny St Angelo

Mailing Address 56 Hazard Ave

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21527

Amount of Each Disbursement this Period

-100.00

Full Name (Last, First, Middle Initial)

C. Bernadette Varela

Mailing Address 84 Vanderland Ave.

City East Providence State RI Zip Code 02914

Purpose of Disbursement
Canvass Stipend State Date

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
12 / 31 / 2013

Transaction ID : SB30B.21528

Amount of Each Disbursement this Period

-100.00

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

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

-225.00

-1050.00

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	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: M M / D D / Y Y Y Y Y Y

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes 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 18 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 SHELDON II WHITEHOUSE	Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address PO BOX 40280	
City State Zip Code PROVIDENCE RI 02940	

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

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 12 / 02 / 2013	4194.55

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4194.55
Transaction ID : H3.21535	
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)	4194.55
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).....	4194.55

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 : H4.21496
151 Broadway Associates
Mailing Address 151 Broadway
City Providence State RI Zip Code 02903
Purpose of Disbursement: Rent and utilities
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 69071.51
Date 12/10/2013
FEDERAL SHARE 136.50 + NONFEDERAL SHARE 513.50 = TOTAL AMOUNT 650.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.21499
Cox Communications
Mailing Address P.O. Box 39
City Newark State NJ Zip Code 07101
Purpose of Disbursement: Cable Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 69139.56
Date 12/10/2013
FEDERAL SHARE 14.29 + NONFEDERAL SHARE 53.76 = TOTAL AMOUNT 68.05

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.21500
Division of Taxation
Mailing Address One Capitol Hill
City Providence State RI Zip Code 02908
Purpose of Disbursement: State payroll taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 69217.68
Date 12/10/2013
FEDERAL SHARE 16.41 + NONFEDERAL SHARE 61.71 = TOTAL AMOUNT 78.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 167.20, 628.97, 796.17

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: [Empty], [Empty], [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) Extra Space Storage		Transaction ID : H4.21501	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	
Mailing Address 1640 Hartford Avenue			Allocated Activity or Event Year-To-Date 69424.68	
City Johnston	State RI	Zip Code 02919	Date 12 / 10 / 2013	
Purpose of Disbursement: Storage rental		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
43.47			163.53	207.00

B. Full Name (Last, First, Middle Initial) Regine Printing		Transaction ID : H4.21503	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	
Mailing Address 208 Laurel Hill Avenue			Allocated Activity or Event Year-To-Date 69933.25	
City Providence	State RI	Zip Code 02909	Date 12 / 10 / 2013	
Purpose of Disbursement: Office printing		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
106.80			401.77	508.57

C. Full Name (Last, First, Middle Initial) Verizon		Transaction ID : H4.21505	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	
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 70303.67	
City Albany	State NY	Zip Code 12250	Date 12 / 10 / 2013	
Purpose of Disbursement: Telephone Service		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
77.79			292.63	370.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.06		857.93		1085.99

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: David Caprio, Transaction ID: H4.21532. Allocated Activity or Event: Administrative. Date: 12/10/2013. Total Amount: 1278.20.

Form B: Hilton New Orleans Riverside, Transaction ID: H4.21538. Allocated Activity or Event: Administrative. Date: 10/17/2013. Total Amount: 567.00.

Form C: Southwest Airlines, Transaction ID: H4.21540. Allocated Activity or Event: Administrative. Date: 10/17/2013. Total Amount: 711.20.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 284.83, 993.37, 1278.20.

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: 284.83, 993.37, 1278.20.

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) Jonathan Boucher		Transaction ID : H4.21544	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	
Mailing Address 23 Perkins Street			Allocated Activity or Event Year-To-Date 71604.87	
City Warwick	State RI	Zip Code 02886	Date 12 / 10 / 2013	
Purpose of Disbursement: Reimbursement		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
4.83			18.17	23.00

B. Full Name (Last, First, Middle Initial) Postmaster		Transaction ID : H4.21546	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	
Mailing Address Turnkey Station			Allocated Activity or Event Year-To-Date 0.00	
City Providence	State RI	Zip Code 02940	Date 11 / 25 / 2013	
Purpose of Disbursement: Office Postage		Category/ Type	Date 11 / 25 / 2013	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date 11 / 25 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
4.83			18.17	23.00

C. Full Name (Last, First, Middle Initial) CitiBusiness Card		Transaction ID : H4.21545	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	
Mailing Address PO Box 182564			Allocated Activity or Event Year-To-Date 71710.21	
City Columbus	State OH	Zip Code 43210	Date 12 / 10 / 2013	
Purpose of Disbursement: Credit Card Payment		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
22.34			83.00	105.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.17		101.17		128.34

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) Clear		Transaction ID : H4.21547		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	
Mailing Address Dept CH 14365				Allocated Activity or Event Year-To-Date 0.00	
City Palatine	State IL	Zip Code 60065		Date 11 / 21 / 2013	
Purpose of Disbursement: Internet Connection		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
22.34			83.00		
					=
					TOTAL AMOUNT
					105.34

B. Full Name (Last, First, Middle Initial) United States Treasury		Transaction ID : H4.21504		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	
Mailing Address PO Box 660351				Allocated Activity or Event Year-To-Date 72366.40	
City Dallas	State TX	Zip Code 75266		Date 12 / 16 / 2013	
Purpose of Disbursement: Payroll tax deposit		Category/ Type			
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
137.80			518.39		
					=
					TOTAL AMOUNT
					656.19

C. Full Name (Last, First, Middle Initial) Beacon Mutual Insurance		Transaction ID : H4.21497		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	
Mailing Address One Beacon Centre				Allocated Activity or Event Year-To-Date 72774.40	
City Warwick	State RI	Zip Code 02886		Date 12 / 28 / 2013	
Purpose of Disbursement: Workers Compensation Insurance		Category/ Type			
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
85.68			322.32		
					=
					TOTAL AMOUNT
					408.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.48		840.71		1064.19

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) David Caprio		Transaction ID : H4.21533		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		
Mailing Address One Center Place				Allocated Activity or Event Year-To-Date 73056.00		
City Providence	State RI	Zip Code 02903		Date 12 / 29 / 2013		
Purpose of Disbursement: Reimbursement		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
59.13			222.47			281.60

B. Full Name (Last, First, Middle Initial) Redlefsen's Restaurant		Transaction ID : H4.21548		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		
Mailing Address 444 Thames Street				Allocated Activity or Event Year-To-Date 0.00		
City Bristol	State RI	Zip Code 02809		Date 10 / 30 / 2013		
Purpose of Disbursement: Meeting		Category/ Type				
Activity or Event Identifier: Administrative						
[MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
6.38			24.00			30.38

C. Full Name (Last, First, Middle Initial) Orlando Airport		Transaction ID : H4.21550		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		
Mailing Address One Jeff Fuqua Boulevard				Allocated Activity or Event Year-To-Date 0.00		
City Orlando	State FL	Zip Code 32827		Date 11 / 20 / 2013		
Purpose of Disbursement: Meals		Category/ Type				
Activity or Event Identifier: Administrative						
[MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
2.16			8.15			10.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.13		222.47		281.60

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Cochon Restaurant. Transaction ID: H4.21552. Allocated Activity or Event: Administrative. Purpose of Disbursement: Meals. Activity or Event Identifier: Administrative. Date: 11/20/2013. Total Amount: 88.54.

Form B: Pat O'Brien's Courtyard Restaurant. Transaction ID: H4.21554. Allocated Activity or Event: Administrative. Purpose of Disbursement: Meals. Activity or Event Identifier: Administrative. Date: 11/21/2013. Total Amount: 90.92.

Form C: Radio Shack. Transaction ID: H4.21556. Allocated Activity or Event: Administrative. Purpose of Disbursement: Office Supplies. Activity or Event Identifier: Administrative. Date: 11/22/2013. Total Amount: 10.89.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

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 : H4.21558
Camelia Grill
Mailing Address 540 Chartres Street
City New Orleans State LA Zip Code 70130
Purpose of Disbursement: Meals
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 0.00
Date 11 / 23 / 2013
FEDERAL SHARE 3.69 + NONFEDERAL SHARE 13.87 = TOTAL AMOUNT 17.56

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.21560
Veterans Taxi Co.
Mailing Address 1010 Wagner Street
City New Orleans State LA Zip Code 70114
Purpose of Disbursement: Taxi Fare
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 0.00
Date 11 / 23 / 2013
FEDERAL SHARE 6.93 + NONFEDERAL SHARE 26.07 = TOTAL AMOUNT 33.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.21534
Jonathan Boucher
Mailing Address 23 Perkins Street
City Warwick State RI Zip Code 02886
Purpose of Disbursement: Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 73145.28
Date 12 / 29 / 2013
FEDERAL SHARE 18.75 + NONFEDERAL SHARE 70.53 = TOTAL AMOUNT 89.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 18.75, 70.53, 89.28

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: 18.75, 70.53, 89.28

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Walmart. Transaction ID: H4.21563. Allocated Activity or Event: Administrative. Date: 12/11/2013. Year-to-Date: 0.00. Summary: FEDERAL SHARE 1.94, NONFEDERAL SHARE 7.30, TOTAL AMOUNT 9.24.

Form B: Ocean State Job Lot. Transaction ID: H4.21565. Allocated Activity or Event: Administrative. Date: 12/11/2013. Year-to-Date: 0.00. Summary: FEDERAL SHARE 16.81, NONFEDERAL SHARE 63.23, TOTAL AMOUNT 80.04.

Form C: Jonathan Boucher. Transaction ID: H4.21498. Allocated Activity or Event: Administrative. Date: 12/30/2013. Year-to-Date: 74628.68. Summary: FEDERAL SHARE 311.51, NONFEDERAL SHARE 1171.89, TOTAL AMOUNT 1483.40.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 311.51, 1171.89, 1483.40.

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: (empty), (empty), (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 : H4.21502**
Extra Space Storage
Mailing Address 1640 Hartford Avenue

City Johnston State RI Zip Code 02919

Purpose of Disbursement: Storage 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: 74835.68

Date: 12 / 30 / 2013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.47		163.53		207.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

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:

Date: / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

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:

Date: / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.47		163.53		207.00

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
1363.60		5050.57		6414.17