

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
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** 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 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 12 01 2009 through 12 31 2009

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 William Lynch

Signature of Treasurer Electronically Filed by William Lynch Date 01 30 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The Loan on Schedule C has no interest rate and no determined due date. This report includes Memo Schedule A entries from Joint fundraisers. The committee has not received its share of the proceeds and expects to receive transfer during the 2010 reporting period.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Rhode Island Democratic State Committee

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		26331.27
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	35269.70									
(c) Total Receipts (from Line 19) .....	22550.53	235130.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57820.23	261462.01								
7. Total Disbursements (from Line 31) .....	19658.39	223300.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38161.84	38161.84								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	5254.47									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Rhode Island Democratic State Committee

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	10000.00
(ii) Unitemized .....	25.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	25.00	10500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	10000.00	11000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	10025.00	21500.00
12. Transfers From Affiliated/Other Party Committees .....	8220.00	70459.48
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	4834.18
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	4305.53	138337.08
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	4305.53	138337.08
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	22550.53	235130.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	18245.00	96793.66

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	912.08	22318.37
(ii) Non-Federal Share.....	5168.58	126964.65
(b) Other Federal Operating Expenditures.....	3332.89	35961.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9413.55	185245.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	225.87
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 .....	10244.84	37579.29
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10244.84	37579.29
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19658.39	223300.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14489.81	96335.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 30

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) .....	10025.00	21500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10025.00	21500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4244.97	58280.36
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	4834.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4244.97	53446.18

# 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 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) J Clement Cicilline	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 100 Rhode Island Ave	<b>Transaction ID:</b> SA11AI.16351
	City State Zip Code Newport RI 02840-0991	Amount of Each Receipt this Period 95.00
	FEC ID number of contributing federal political committee. <b>C</b>	RI Party Victory Fund
	Name of Employer Occupation Ceo-Clinical President	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>B.</b>	Full Name (Last, First, Middle Initial) DNC Services Corp	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 430 S. Capitol St SE	<b>Transaction ID:</b> SA11AI.16352
	City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 878.75
	FEC ID number of contributing federal political committee. <b>C</b> C00010603	RI Party Victory Fund Uni-temized
	Name of Employer Occupation	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT MASON	Date of Receipt MM / DD / YYYY 11 / 03 / 2009
	Mailing Address 50 MCPARTLAND WAY	<b>Transaction ID:</b> SA11AI.16355
	City State Zip Code E GREENWICH RI 02818	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Dollars For Democrats
	Name of Employer Occupation SR VP	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

C. Form/Schedule : **SA11AI**

Dollars For Democrats

Transaction ID : **SA11AI.16355**



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial)  
ROBERT MASON

Mailing Address 50 MCPARTLAND WAY

City State Zip Code  
E GREENWICH RI 02818

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SR VP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.16356

Amount of Each Receipt this Period  
100.00

Dollars For Democrats

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>

A. Form/Schedule : **SA11AI**

Dollars For Democrats

Transaction ID : **SA11AI.16356**

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

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

FOR LINE NUMBER: PAGE 11 / 30  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
American Federation State County Employees

Mailing Address 1625 L Street, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.16344

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
ZENECA INC. POLITICAL ACTION COMMITTEE

Mailing Address c/o Zeneca Inc.  
1800 Concord Pike, PO Box 15437

City State Zip Code  
Wilmington DE 19850

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 2 / 2 0 0 9

**Transaction ID:** SA11C.16343

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00

**TOTAL** This Period (last page this line number only) ..... ► 10000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 30

(check only one)

<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.**

Full Name (Last, First, Middle Initial)  
ASDC PARTNERSHIP PROGRAM

Mailing Address 430 South Capitol Street

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00402404

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
159.48

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA12.16360

Amount of Each Receipt this Period

82.45

Joint Fundraiser

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code  
Washington DC 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 ▼  
65300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA12.16348

Amount of Each Receipt this Period

3220.00

In-kind - Voter file Access

**C.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code  
Washington DC 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 ▼  
70300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 9

Transaction ID: SA12.16341

Amount of Each Receipt this Period

5000.00

Transfer

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

8220.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 30

(check only one)

<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.

Full Name (Last, First, Middle Initial)  
UNITEMIZED CONTRIBUTIONS

Mailing Address 430 S CAPITOL ST SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
[ ]

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	9

Transaction ID: SA12.16358

Amount of Each Receipt this Period

2343.00
---------

Dollars for Democrats

[MEMO ITEM]

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

0.00
------

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

8220.00
---------

**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)

PAGE 14 / 30

<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

**A.**

Full Name (Last, First, Middle Initial)  
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

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB21B.16349

Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

3220.00

**B.**

Full Name (Last, First, Middle Initial)  
E-Online Data

Mailing Address 280 Fore Street

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Credit card fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB21B.16339

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

93.64

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3313.64

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

3313.64

**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

<b>A.</b> Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island Mailing Address PO Box 1057 City Providence State RI Zip Code 02901 Purpose of Disbursement Employee Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB30B.16309 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 235.58 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Division of Taxation Mailing Address One Capitol Hill City Providence State RI Zip Code 02908 Purpose of Disbursement State Withholding Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB30B.16310 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 447.68 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Grilo Mailing Address 481 Charles Street City Providence State RI Zip Code 02904 Purpose of Disbursement Net wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB30B.16311 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1855.81 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2539.07
<b>TOTAL</b> 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)

PAGE 16 / 30

<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

A.	Full Name (Last, First, Middle Initial) Timothy Grilo	Transaction ID: SB30B.16312 Date of Disbursement 12 / 30 / 2009
	Mailing Address 481 Charles Street	
	City Providence State RI Zip Code 02904	Amount of Each Disbursement this Period 1855.81
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Raymond J Sullivan, Jr.	Transaction ID: SB30B.16313 Date of Disbursement 12 / 15 / 2009
	Mailing Address 2 Cornell Court	
	City Coventry State RI Zip Code 02816	Amount of Each Disbursement this Period 1429.87
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Raymond J Sullivan, Jr.	Transaction ID: SB30B.16314 Date of Disbursement 12 / 30 / 2009
	Mailing Address 2 Cornell Court	
	City Coventry State RI Zip Code 02816	Amount of Each Disbursement this Period 1429.87
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4715.55
<b>TOTAL</b> 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)

PAGE 17 / 30

<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

A.

Full Name (Last, First, Middle Initial)  
United States Treasury

Mailing Address PO Box 660351

City State Zip Code  
Dallas TX 75266

Purpose of Disbursement  
Payroll tax deposit

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.16315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

**SCHEDULE C (FEC Form 3X)**

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

**LOANS**

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

**Transaction ID: SC/9.5183**

<b>LOAN SOURCE</b> 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 5249.87	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5249.87
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred M M 1 2 D D 3 1 Y Y Y Y 1 9 8 8	Date Due	Interest Rate	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------	---------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="5249.87"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="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 19 / 30	
	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

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor SHELDON II WHITEHOUSE	Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address 32 ELMGROVE AVENUE	
City State ZIP Code PROVIDENCE RI 02906	

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	4.60
2) <b>TOTALS</b> This Period (last page this line number only).....	4.60
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	5249.87
4) <b>ADD 2) and 3)</b> 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 RI Democratic Non-federal Account	DATE OF RECEIPT M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 4305.53
--	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	4305.53	Transaction ID: H3.16347
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	4305.53
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	4305.53

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Cox Communications			Type of Allocated Activity: <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 39			Allocated Activity or Event Year-To-Date 143359.36		
City Newark	State NJ	Zip Code 07101	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Monthly modem and cable			Transaction ID: H4.16300		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.55		133.45		157.00

<b>B. Full Name (Last, First, Middle Initial)</b> Susann Della Rosa			Type of Allocated Activity: <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 60 Don Avenue			Allocated Activity or Event Year-To-Date 144309.36		
City Rumford	State RI	Zip Code 02916	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Accounting Services-non employee			Transaction ID: H4.16301		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.50		807.50		950.00

<b>C. Full Name (Last, First, Middle Initial)</b> Elevate Consulting LLC			Type of Allocated Activity: <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 8378			Allocated Activity or Event Year-To-Date 146521.86		
City Warwick	State RI	Zip Code 02888	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Web site updating			Transaction ID: H4.16302		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.86		1880.64		2212.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
497.91		2821.59		3319.50

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> IKON Office Solutions			Type of Allocated Activity: <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 30069			Allocated Activity or Event Year-To-Date 146744.86		
City Hartford	State CT	Zip Code 06150	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Copier Lease			Transaction ID: H4.16303		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.45		189.55		223.00

<b>B. Full Name (Last, First, Middle Initial)</b> William Lynch			Type of Allocated Activity: <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 321 South Main Street			Allocated Activity or Event Year-To-Date 146839.86		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Reimburse travel expenses			Transaction ID: H4.16304		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.25		80.75		95.00

<b>C. Full Name (Last, First, Middle Initial)</b> BWI Taxi Management			Type of Allocated Activity: <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 Baltimore/Washington Airport			Allocated Activity or Event Year-To-Date 0.00		
City Baltimore	State MD	Zip Code 21240	Date MM / DD / YYYY 12 / 05 / 2009		
Purpose of Disbursement: Transportation			Transaction ID: H4.16316		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.25		80.75		95.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.70		270.30		318.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <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 146883.86																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02940																							
Purpose of Disbursement: Office postage			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H4.16305			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	3	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	1	3	/	2	0	0	9																
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

<b>B. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <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 147068.86																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02940																							
Purpose of Disbursement: Annual Bulk Mail fee			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H4.16306			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	3	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	1	3	/	2	0	0	9																
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.75		157.25		185.00

<b>C. Full Name (Last, First, Middle Initial)</b> Pui O			Type of Allocated Activity: <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 249 Roosevelt Avenue			Allocated Activity or Event Year-To-Date 147868.86																						
City	State	Zip Code	Category/ Type																						
Pawtucket	RI	02860																							
Purpose of Disbursement: December rent and electricity			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H4.16307			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	3	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	1	3	/	2	0	0	9																
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.00		680.00		800.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.35		874.65		1029.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <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 148107.97		
City Albany	State NY	Zip Code 12250	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Telephone service			Transaction ID: H4.16308		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.87		203.24		239.11

<b>B. Full Name (Last, First, Middle Initial)</b> Card Services			Type of Allocated Activity: <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 13337			Allocated Activity or Event Year-To-Date 148386.16		
City Philadelphia	State PA	Zip Code 19101	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.16317		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.73		236.46		278.19

<b>C. Full Name (Last, First, Middle Initial)</b> Imondi & Son Florists			Type of Allocated Activity: <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 182 Smithfield Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Sympathy Arrangement			Transaction ID: H4.16320		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.15		51.84		60.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.60		439.70		517.30

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Southwest Airlines			Type of Allocated Activity: <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 Theodore Francis Green Airport			Allocated Activity or Event Year-To-Date 0.00		
City Warwick	State RI	Zip Code 02886	Date MM / DD / YYYY 12 / 13 / 2009		
Purpose of Disbursement: Airfare			Transaction ID: H4.16321		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.58		184.62		217.20

<b>B. Full Name (Last, First, Middle Initial)</b> A T & T Mobility			Type of Allocated Activity: <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 536216			Allocated Activity or Event Year-To-Date 148537.38		
City Atlanta	State GA	Zip Code 30353	Date MM / DD / YYYY 12 / 28 / 2009		
Purpose of Disbursement: Cell phone service			Transaction ID: H4.16299		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.68		128.54		151.22

<b>C. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <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 300 South Riverside Plaza			Allocated Activity or Event Year-To-Date 149072.33		
City Chicago	State IL	Zip Code 60606	Date MM / DD / YYYY 12 / 28 / 2009		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.16318		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.25		454.70		534.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.93		583.24		686.17

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Tini Bar & Grill

Mailing Address  
200 Washington Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting 11/17/09

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 28 / 2009

Transaction ID: H4.16322

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.77		95.03		111.80

**B. Full Name (Last, First, Middle Initial)**  
Westin Hotel

Mailing Address  
One West Exchange Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 03 / 2009

Transaction ID: H4.16323

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.39		58.87		69.26

**C. Full Name (Last, First, Middle Initial)**  
Tini Bar & Grill

Mailing Address  
200 Washington Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 03 / 2009

Transaction ID: H4.16324

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.52		31.27		36.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Tini Bar & Grill

Mailing Address  
200 Washington Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 04 / 2009

Transaction ID: H4.16325

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.60		31.72		37.32

**B. Full Name (Last, First, Middle Initial)**  
Bistro Bis

Mailing Address  
15 E Street NW

City State Zip Code  
Washington DC 20001

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 09 / 2009

Transaction ID: H4.16326

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.89		95.71		112.60

**C. Full Name (Last, First, Middle Initial)**  
Hemenway's Seafood

Mailing Address  
1 Providence Washington Plaza

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 12 / 11 / 2009

Transaction ID: H4.16327

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		34.02		40.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Pot Au Feu

Mailing Address  
44 Custom House

City	State	Zip Code
Providence	RI	02903

Category/  
Type

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	9

Transaction ID: H4.16328

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.62		37.50		44.12

**B. Full Name (Last, First, Middle Initial)**  
Aspire Restaurant

Mailing Address  
311 Westminster Street

City	State	Zip Code
Providence	RI	02903

Category/  
Type

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	9

Transaction ID: H4.16329

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.67		20.77		24.44

**C. Full Name (Last, First, Middle Initial)**  
Haruki East

Mailing Address  
176 Wayland Avenue

City	State	Zip Code
Providence	RI	02906

Category/  
Type

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	9

Transaction ID: H4.16330

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.79		49.81		58.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Card Services			Type of Allocated Activity: <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 13337			Allocated Activity or Event Year-To-Date 149283.02		
City Philadelphia	State PA	Zip Code 19101	Date <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.16319		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.59		179.10		210.69

<b>B. Full Name (Last, First, Middle Initial)</b> TIVO Store			Type of Allocated Activity: <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 2160 Gold Street			Allocated Activity or Event Year-To-Date 0.00		
City Alviso	State CA	Zip Code 95002	Date <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: TIVO fees			Transaction ID: H4.16331		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.87		22.03		25.90

<b>C. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <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 <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Office postage			Transaction ID: H4.16332		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.75		26.93		31.68

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.59		179.10		210.69

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Constant Contact			Type of Allocated Activity: <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 1601 Trapelo Road			Allocated Activity or Event Year-To-Date 0.00		
City Waltham	State MA	Zip Code 02451	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Mailing List maintenance			Transaction ID: H4.16333		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		29.75		35.00

<b>B. Full Name (Last, First, Middle Initial)</b> Joe's Stone Crab			Type of Allocated Activity: <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 11 Washington Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Miami Beach	State FL	Zip Code 33139	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Meeting			Transaction ID: H4.16334		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.57		82.54		97.11

<b>C. Full Name (Last, First, Middle Initial)</b> Go Airport Shuttle			Type of Allocated Activity: <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 221 W Oakland Park Boulevard			Allocated Activity or Event Year-To-Date 0.00		
City Fort Lauderdale	State FL	Zip Code 33311	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Transportation			Transaction ID: H4.16336		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		17.85		21.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
912.08	5168.58	6080.66