

# 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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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 02 / 01 / 2017 through M M M / D D D / Y Y Y Y Y Y 02 / 28 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Padwa, Jeffrey, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Padwa, Jeffrey, , , *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2017

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Rhode Island Democratic State Committee

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2017"/>  | <input type="text" value="15056.42"/> | <input type="text" value="15056.42"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="14161.99"/> |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="37104.29"/> | <input type="text" value="49617.05"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="51266.28"/> | <input type="text" value="64673.47"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="38703.06"/> | <input type="text" value="52110.25"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="12563.22"/> | <input type="text" value="12563.22"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="5254.47"/>  |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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. 05/2016)

Write or Type Committee Name

**Rhode Island Democratic State Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 02 / 01 / 2017 To: M M / D D / Y Y Y Y Y 02 / 28 / 2017

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 48.02                             |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 0.00                          | 48.02                             |
| 12. Transfers From Affiliated/Other Party Committees.....   | 31376.17                      | 37733.34                          |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 793.14                        | 793.14                            |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 4934.98                       | 11042.55                          |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 4934.98                       | 11042.55                          |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 37104.29                      | 49617.05                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 32169.31                      | 38574.50                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 943.20                        | 2255.04                           |
| (ii) Non-Federal Share.....  | 3548.22                       | 8483.20                           |
| (b) Other Federal Operating Expenditures .....   | 9211.64                       | 16372.01                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 13703.06                      | 27110.25                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 25000.00                      | 25000.00                          |
| 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 (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 38703.06                      | 52110.25                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 35154.84                      | 43627.05                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 0.00                                  | 48.02                                     |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 0.00                                  | 48.02                                     |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 10154.84                              | 18627.05                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 10154.84                              | 18627.05                                  |

: 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 144   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

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

**A. Aaron, Billye, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1611 Adams Dr SW  
 City Atlanta State GA Zip Code 30311-3625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.30666**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

**B. Alsop, Stewart, Johonnot, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 689 Lisbon St  
 City San Francisco State CA Zip Code 94112-3507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Founder and Partner Occupation (for Individual) Alsop Louie  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2016  
**Transaction ID : SA11AI.30668**  
 Amount of Each Receipt this Period  
 526.32  
 Memo Item

**C. Bendheim, Jack, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 697 W 247th St  
 City Bronx State NY Zip Code 10471-3224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Phibro Animal Health Corporation Occupation (for Individual) Executive  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : SA11AI.30670**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30666

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30668

Hillary Victory Fund 4



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30670

Hillary Victory Fund 4

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 10 OF 144  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Billinghamst Solomon, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 E 66th St  
 City New York State NY Zip Code 10065-6548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2016  
**Transaction ID : SA11AI.30671**  
 Amount of Each Receipt this Period  
 0.68  
 Memo Item

**B. Billinghamst Solomon, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 E 66th St  
 City New York State NY Zip Code 10065-6548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2016  
**Transaction ID : SA11AI.30672**  
 Amount of Each Receipt this Period  
 120.37  
 Memo Item

**C. Blakeslee, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 San Gabriel St  
 City Austin State TX Zip Code 78701-1029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Garden Design Install  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2016  
**Transaction ID : SA11AI.30673**  
 Amount of Each Receipt this Period  
 789.48  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30671

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30672

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30673

Hillary Victory Fund 4

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 13 OF 144               |
|   | <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             |                              |

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

**A. Brown, Garvin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 Lansdowne Rd  
 United Kingdom W11 2LR  
 City London State ZZ Zip Code 00000  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Brown-Forman Corporation Occupation (for Individual) Chairman  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2016  
**Transaction ID : SA11AI.30675**  
 Amount of Each Receipt this Period  
 365.79  
 Memo Item

**B. Buechner, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 975 Memorial Dr  
 Apt 406, c/o David Altshuler  
 City Cambridge State MA Zip Code 02138-5803  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2016  
**Transaction ID : SA11AI.30676**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**C. Clasquin, Lorraine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 911 Old Stonehedge St  
 City West Lake Hills State TX Zip Code 78746-3529  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2016  
**Transaction ID : SA11AI.30678**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30675

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30676

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30678

Hillary Victory Fund 4

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 16 OF 144  |
| <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. Cox, Morgan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3338 Blackburn St  
 City Dallas State TX Zip Code 75204-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2016  
**Transaction ID : SA11AI.30679**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

**B. Dao, Huong, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2239 W Farlington St  
 City West Covina State CA Zip Code 91790-5606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) L.A. CITY COLLEGE DISTRICT Occupation (for Individual) MATH. INSTRUCTOR  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11AI.30794**  
 Amount of Each Receipt this Period  
 1.25  
 Memo Item

**C. Dillon, Michael, Earl, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 4339  
 City Long Beach State CA Zip Code 90804-0339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Michael Earl Dillon, P.E. Occupation (for Individual) Professional Engineer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2016  
**Transaction ID : SA11AI.30681**  
 Amount of Each Receipt this Period  
 0.26  
 Memo Item

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30679

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30794

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30681

Hillary Victory Fund 4

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 19 OF 144 |
|   | <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. Dillon, Michael, Earl, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 4339  
 City Long Beach State CA Zip Code 90804-0339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Michael Earl Dillon, P.E. Occupation (for Individual) Professional Engineer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2016  
**Transaction ID : SA11AI.30682**  
 Amount of Each Receipt this Period  
 0.26  
 Memo Item

**B. Dilorenzo, Leanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 SW Prospect Dr  
 City Portland State OR Zip Code 97201-2484  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Nonprofit Work  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2016  
**Transaction ID : SA11AI.30683**  
 Amount of Each Receipt this Period  
 1.30  
 Memo Item

**C. Dinh, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 269 S Beverly Dr  
 City Beverly Hills State CA Zip Code 90212-3851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Longmi Lashes Occupation (for Individual) Cosmetology  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2016  
**Transaction ID : SA11AI.30684**  
 Amount of Each Receipt this Period  
 52.63  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30682

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30683

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30684

Hillary Victory Fund 4

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 22 OF 144               |
|   | <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             |                              |

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

**A. Djerassi, Dale, Nmn, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 Bear Gulch Rd  
 City Woodside State CA Zip Code 94062-4410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Producer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2016  
**Transaction ID : SA11AI.30685**  
 Amount of Each Receipt this Period  
 71.84  
 Memo Item

**B. Fox, Alan, Cooper, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12411 Ventura Blvd  
 City Studio City State CA Zip Code 91604-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACF Property Management Occupation (for Individual) President  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2016  
**Transaction ID : SA11AI.30687**  
 Amount of Each Receipt this Period  
 192.11  
 Memo Item

**C. Gabel, Caroline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 Hoffman Ln  
 City Chestertown State MD Zip Code 21620-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2016  
**Transaction ID : SA11AI.30689**  
 Amount of Each Receipt this Period  
 251.32  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30685

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30687

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30689

Hillary Victory Fund 4

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 25 OF 144  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Garcia, Ernest, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4330 N 57th Way  
 City Phoenix State AZ Zip Code 85018-3239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DriveTime Occupation (for Individual) Chairman  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2016  
**Transaction ID : SA11AI.30691**  
 Amount of Each Receipt this Period  
 586.85  
 Memo Item

**B. Garriott de Cayeux, Laetitia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7400 Coldwater Cyn  
 City Austin State TX Zip Code 78730-3005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Escape Dynamics Occupation (for Individual) Aerospace  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016  
**Transaction ID : SA11AI.30692**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**C. Garriott de Cayeux, Laetitia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7400 Coldwater Cyn  
 City Austin State TX Zip Code 78730-3005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Escape Dynamics Occupation (for Individual) Aerospace  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2016  
**Transaction ID : SA11AI.30693**  
 Amount of Each Receipt this Period  
 11.99  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30691

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30692

\* In-Kind: Catering, Food & Beverages

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30693

\* In-Kind: Catering, Food & Beverages

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 28 OF 144               |
|   | <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             |                              |

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

**A. Gibbons, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 2247  
 City East Setauket State NY Zip Code 11733-0726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.30694**  
 Amount of Each Receipt this Period  
 13.16  
 Memo Item

**B. Girardi, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1126 Wilshire Blvd  
 City Los Angeles State CA Zip Code 90017-1904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Girardi & Keese Occupation (for Individual) Attorney  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : SA11AI.30695**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

**C. Goldberg, Cindy, Maggioncalda-Es, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Noel Rd  
 City Woodside State CA Zip Code 94062-4218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Urban Market Bags Occupation (for Individual) Co-Owner  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : SA11AI.30696**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30694

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30695

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30696

Hillary Victory Fund 4

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 31 OF 144               |
|   | <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             |                              |

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

**A. Goldberg, Evan, Mark, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Noel Rd  
 City Woodside State CA Zip Code 94062-4218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NetSuite, Inc. Occupation (for Individual) Software Developer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.30697**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

**B. Goldman, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 Serrano Dr  
 City Atherton State CA Zip Code 94027-3934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goldman Environmental Prize Occupation (for Individual) Philanthropist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.30698**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

**C. Goldman, Marcia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 Serrano Dr  
 City Atherton State CA Zip Code 94027-3934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Therapist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.30699**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30697

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30698

Hillary Victory Fund 4



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30699

Hillary Victory Fund 4

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 34 OF 144               |
|   | <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             |                              |

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

**A. Goodson, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 92 Rolling Hill Rd  
 City Skillman State NJ Zip Code 08558-2318  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Crest Ultrasonics Occupation (for Individual) CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : SA11AI.30700**  
 Amount of Each Receipt this Period  
 842.11  
 Memo Item

**B. Greer, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Raven Dr  
 City Morristown State NJ Zip Code 07960-6434  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Retired Occupation (for Individual) Programmer  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2016  
**Transaction ID : SA11AI.30701**  
 Amount of Each Receipt this Period  
 0.66  
 Memo Item

**C. Gund, Louise, Laidlaw, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 Plaza Dr  
 City Berkeley State CA Zip Code 94705-2413  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Louise Gund Foundation  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2016  
**Transaction ID : SA11AI.30702**  
 Amount of Each Receipt this Period  
 131.58  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30700

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30701

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30702

Hillary Victory Fund 4

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 37 OF 144 |
|   | <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. Hadar, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 Lexington Ave  
 City New York State NY Zip Code 10065-8165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Real Estate Investment and Developme  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2016  
**Transaction ID : SA11AI.30704**  
 Amount of Each Receipt this Period  
 1681.59  
 Memo Item

**B. Hauser, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 Buell Ct  
 City Clinton State CT Zip Code 06413-2602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Psychologist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2016  
**Transaction ID : SA11AI.30705**  
 Amount of Each Receipt this Period  
 1.71  
 Memo Item

**C. Hazlewood, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Deforest Ave  
 City Summit State NJ Zip Code 07901-2188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McKinsey & Company Occupation (for Individual) Consultant  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2016  
**Transaction ID : SA11AI.30707**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30704

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30705

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30707

Hillary Victory Fund 4

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:             | PAGE 40 OF 144               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <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. Holden, Karol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 676085  
 City Rancho Santa Fe State CA Zip Code 92067-6085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2016  
**Transaction ID : SA11AI.30708**  
 Amount of Each Receipt this Period  
 455.27  
 Memo Item

**B. Hostovich, Teena, Maria, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4052 Hampstead Rd  
 City La Canada Flintridge State CA Zip Code 91011-3927  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lockton Occupation (for Individual) Insurance Broker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.30709**  
 Amount of Each Receipt this Period  
 173.69  
 Memo Item

**C. Hull, Blair, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 W Jackson Blvd  
 City Chicago State IL Zip Code 60604-2992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hull Investments, LLC Occupation (for Individual) Private Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2016  
**Transaction ID : SA11AI.30711**  
 Amount of Each Receipt this Period  
 131.58  
 Memo Item

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30708

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30709

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30711

Hillary Victory Fund 4

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 43 OF 144               |
|   | <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  |

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

**A. Jackson, Anita, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9316 Royal Crest Dr  
 City Raleigh State NC Zip Code 27617-7568  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2016  
**Transaction ID : SA11AI.30712**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

**B. Jordan, Wayne, Douglas, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 468 14th St Ste 1417  
 City Oakland State CA Zip Code 94612-2711  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Real Estate Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.30713**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**C. Kang, Yongmee, Michele, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5050 N Ocean Dr Apt 701  
 City Riviera Beach State FL Zip Code 33404-2575  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Cognosante, LLC Occupation (for Individual) Chief Executive Officer  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2016  
**Transaction ID : SA11AI.30715**  
 Amount of Each Receipt this Period  
 657.90  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30712

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30713

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30715

Hillary Victory Fund 4

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 46 OF 144               |
|   | <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"/>                | <input type="checkbox"/> 17  |

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

**A. Kayrouz, Joumana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 Marblehead Dr  
 City Bloomfield Hills State MI Zip Code 48304-3337  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Law Offices of Joumana Kayrouz Occupation (for Individual) Attorney  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : SA11AI.30717**  
 Amount of Each Receipt this Period  
 403.03  
 Memo Item

**B. Leca, Noelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 Linda Vista Ave  
 City Tiburon State CA Zip Code 94920-1981  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Retired Occupation (for Individual) Executive  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.30718**  
 Amount of Each Receipt this Period  
 1.37  
 Memo Item

**C. Levin, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 W Hubbard St  
 City Chicago State IL Zip Code 60654-5798  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) The Habitat Company Occupation (for Individual) Chairman  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : SA11AI.30719**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30717

\* In-Kind: Event Production

Form/Schedule: SA11AI

Transaction ID: SA11AI.30718

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30719

Hillary Victory Fund 4

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 49 OF 144  |
| <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. Lindelof, Heidi, Fugeman, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 S Gunston Dr  
 City Los Angeles State CA Zip Code 90049-3045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt **09 / 30 / 2016**  
**Transaction ID : SA11AI.30721**  
 Amount of Each Receipt this Period **878.95**  
 Memo Item

**B. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt **11 / 15 / 2016**  
**Transaction ID : SA11AI.30722**  
 Amount of Each Receipt this Period **6.58**  
 Memo Item

**C. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt **11 / 20 / 2016**  
**Transaction ID : SA11AI.30723**  
 Amount of Each Receipt this Period **26.32**  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30721

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30722

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30723

Hillary Victory Fund 4

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 52 OF 144               |
|   | <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             |                              |

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

**A. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr  
 Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 25 / 2016**  
**Transaction ID : SA11AI.30724**  
 Amount of Each Receipt this Period  
**6.58**  
 Memo Item

**B. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr  
 Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 15 / 2016**  
**Transaction ID : SA11AI.30725**  
 Amount of Each Receipt this Period  
**6.58**  
 Memo Item

**C. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr  
 Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2016**  
**Transaction ID : SA11AI.30726**  
 Amount of Each Receipt this Period  
**26.32**  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30724

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30725

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30726

Hillary Victory Fund 4

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 55 OF 144               |
|   | <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             |                              |

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

**A. Lindy, Cathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Cape Marco Dr  
 Unit 506  
 City Marco Island State FL Zip Code 34145-6344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 25 / 2016  
**Transaction ID : SA11AI.30727**  
 Amount of Each Receipt this Period  
 6.58  
 Memo Item

**B. Machado Gonzalez, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 426  
 City Bayamon State PR Zip Code 00960-0426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Doctor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2016  
**Transaction ID : SA11AI.30728**  
 Amount of Each Receipt this Period  
 26.32  
 Memo Item

**C. Machado Gonzalez, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 426  
 City Bayamon State PR Zip Code 00960-0426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Doctor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : SA11AI.30729**  
 Amount of Each Receipt this Period  
 105.26  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30727

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30728

Hillary Victory Fund 4



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30729

Hillary Victory Fund 4

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 58 OF 144               |
|   | <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             |                              |

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

**A. Martinez, Leopoldo, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7817 Falstaff Rd

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>McLean | State<br>VA | Zip Code<br>22102-2724 |
|----------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>LMN Consulting LLC | Occupation (for Individual)<br>Attorney/Consultant |
|---|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 07    |   | 2016        |

**Transaction ID : SA11AI.30730**

Amount of Each Receipt this Period  

|       |
|-------|
| 11.32 |
|-------|

Memo Item

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

Mailing Address 7817 Falstaff Rd

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>McLean | State<br>VA | Zip Code<br>22102-2724 |
|----------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>LMN Consulting LLC | Occupation (for Individual)<br>Attorney/Consultant |
|---|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 19    |   | 2016        |

**Transaction ID : SA11AI.30731**

Amount of Each Receipt this Period  

|      |
|------|
| 0.84 |
|------|

Memo Item

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

Mailing Address 7817 Falstaff Rd

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>McLean | State<br>VA | Zip Code<br>22102-2724 |
|----------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>LMN Consulting LLC | Occupation (for Individual)<br>Attorney/Consultant |
|---|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 10    |   | 2016        |

**Transaction ID : SA11AI.30732**

Amount of Each Receipt this Period  

|       |
|-------|
| 26.32 |
|-------|

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30730

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30731

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30732

Hillary Victory Fund 4

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 61 OF 144               |
|   | <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             |                              |

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

**A. Martinez, Leopoldo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7817 Falstaff Rd  
 City McLean State VA Zip Code 22102-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LMN Consulting LLC Occupation (for Individual) Attorney/Consultant  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 10 / 10 / 2016  
**Transaction ID : SA11AI.30733**  
 Amount of Each Receipt this Period  
 13.16  
 Memo Item

**B. Martinez, Leopoldo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7817 Falstaff Rd  
 City McLean State VA Zip Code 22102-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LMN Consulting LLC Occupation (for Individual) Attorney/Consultant  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 10 / 23 / 2016  
**Transaction ID : SA11AI.30734**  
 Amount of Each Receipt this Period  
 6.98  
 Memo Item

**C. Martinez, Leopoldo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7817 Falstaff Rd  
 City McLean State VA Zip Code 22102-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LMN Consulting LLC Occupation (for Individual) Attorney/Consultant  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 10 / 25 / 2016  
**Transaction ID : SA11AI.30735**  
 Amount of Each Receipt this Period  
 534.29  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30733

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30734

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30735

Hillary Victory Fund 4

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 64 OF 144  |
| <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. McCarthy, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 322 W 57th St  
 City New York State NY Zip Code 10019-3701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spinnaker Capital Ltd Occupation (for Individual) Fund Management  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2016  
**Transaction ID : SA11AI.30736**  
 Amount of Each Receipt this Period  
 0.30  
 Memo Item

**B. McCarthy, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 322 W 57th St  
 City New York State NY Zip Code 10019-3701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spinnaker Capital Ltd Occupation (for Individual) Fund Management  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2016  
**Transaction ID : SA11AI.30737**  
 Amount of Each Receipt this Period  
 0.30  
 Memo Item

**C. Meeker, Guy, Bentley, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 465 10th Ave  
 City New York State NY Zip Code 10018-1106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bentley Meeker Lighting Occupation (for Individual) Owner  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2016  
**Transaction ID : SA11AI.30738**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30736

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30737

Hillary Victory Fund 4

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.30738

Hillary Victory Fund 4

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 67 OF 144               |
|   | <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             |                              |

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

**A. Meeker, Guy, Bentley, , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 465 10th Ave

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>New York | State<br>NY | Zip Code<br>10018-1106 |
|------------------|-------------|------------------------|

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

|  |                                      |
|--|--------------------------------------|
| Name of Employer (for Individual)<br>Bentley Meeker Lighting | Occupation (for Individual)<br>Owner |
|--|--------------------------------------|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 08    | / | 2016        |

**Transaction ID : SA11AI.30739**

Amount of Each Receipt this Period  

|       |
|-------|
| 71.05 |
|-------|

Memo Item

**B. Mendelson, Alan, Charles, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 De Bell Dr

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Atherton | State<br>CA | Zip Code<br>94027-2253 |
|------------------|-------------|------------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Latham & Watkins LLP | Occupation (for Individual)<br>Attorney |
|---|---|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 25    | / | 2016        |

**Transaction ID : SA11AI.30741**

Amount of Each Receipt this Period  

|        |
|--------|
| 226.32 |
|--------|

Memo Item

**C. Meyer Simon, Diane, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1570 E Mountain Dr

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>Montecito | State<br>CA | Zip Code<br>93108-1302 |
|-------------------|-------------|------------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Global Green USA | Occupation (for Individual)<br>Environmentalist |
|---|---|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 26    | / | 2016        |

**Transaction ID : SA11AI.30742**

Amount of Each Receipt this Period  

|       |
|-------|
| 52.03 |
|-------|

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30739

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30741

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30742

Hillary Victory Fund 4

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 70 OF 144               |
|   | <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             |                              |

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

**A. Meyer Simon, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1570 E Mountain Dr  
 City Montecito State CA Zip Code 93108-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Global Green USA Occupation (for Individual) Environmentalist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 22 / 2016  
**Transaction ID : SA11AI.30743**  
 Amount of Each Receipt this Period  
 2.63  
 Memo Item

**B. Meyer Simon, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1570 E Mountain Dr  
 City Montecito State CA Zip Code 93108-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Global Green USA Occupation (for Individual) Environmentalist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2016  
**Transaction ID : SA11AI.30744**  
 Amount of Each Receipt this Period  
 0.26  
 Memo Item

**C. Meyer Simon, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1570 E Mountain Dr  
 City Montecito State CA Zip Code 93108-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Global Green USA Occupation (for Individual) Environmentalist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2016  
**Transaction ID : SA11AI.30745**  
 Amount of Each Receipt this Period  
 2.63  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30743

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30744

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30745

Hillary Victory Fund 4

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 73 OF 144  |
| <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. Mills, Bonnie, Kendall, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3407 Monte Vista Dr  
 City Austin State TX Zip Code 78731-5722  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2016  
**Transaction ID : SA11AI.30746**  
 Amount of Each Receipt this Period  
 789.48  
 Memo Item

**B. Murphy, Thomas, P., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5900 Blue Lagoon Drive Suite 200  
 City Miami State FL Zip Code 33126  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Coastal Construction Occupation (for Individual) General Contractor, CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2016  
**Transaction ID : SA11AI.30747**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**C. Nation, Chickasaw, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2020 Lonnie Abbott Blvd  
 City Ada State OK Zip Code 74820-9255  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) N/A Occupation (for Individual) Tribe  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2016  
**Transaction ID : SA11AI.30748**  
 Amount of Each Receipt this Period  
 9.89  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30746

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30747

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30748

Hillary Victory Fund 4

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 76 OF 144  |
| <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. Nielsen, Sheila, Markin, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 Pelham Rd

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Winnetka | State<br>IL | Zip Code<br>60093-2015 |
|------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Executive Coach |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 06    | / | 2016        |

**Transaction ID : SA11AI.30749**

Amount of Each Receipt this Period  

|      |
|------|
| 1.55 |
|------|

Memo Item

**B. Nielsen, Sheila, Markin, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 Pelham Rd

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Winnetka | State<br>IL | Zip Code<br>60093-2015 |
|------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Executive Coach |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 15    | / | 2016        |

**Transaction ID : SA11AI.30750**

Amount of Each Receipt this Period  

|      |
|------|
| 2.63 |
|------|

Memo Item

**C. Nielsen, Sheila, Markin, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 Pelham Rd

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Winnetka | State<br>IL | Zip Code<br>60093-2015 |
|------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Executive Coach |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 27    | / | 2016        |

**Transaction ID : SA11AI.30751**

Amount of Each Receipt this Period  

|      |
|------|
| 2.63 |
|------|

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30749

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30750

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30751

Hillary Victory Fund 4

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 79 OF 144  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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

**A. Nielsen, Sheila, Markin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1075 Pelham Rd  
 City Winnetka State IL Zip Code 60093-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Executive Coach  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2016  
**Transaction ID : SA11AI.30752**  
 Amount of Each Receipt this Period  
 2.63  
 Memo Item

**B. Nielsen, Sheila, Markin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1075 Pelham Rd  
 City Winnetka State IL Zip Code 60093-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Executive Coach  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 27 / 2016  
**Transaction ID : SA11AI.30753**  
 Amount of Each Receipt this Period  
 2.63  
 Memo Item

**C. Nielsen, Sheila, Markin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1075 Pelham Rd  
 City Winnetka State IL Zip Code 60093-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Executive Coach  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2016  
**Transaction ID : SA11AI.30754**  
 Amount of Each Receipt this Period  
 2.63  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30752

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30753

Hillary Victory Fund 4



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30754

Hillary Victory Fund 4

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 82 OF 144               |
|   | <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             |                              |

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

**A. Niemczyk, Caroline, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 40

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>Bedford Hills | State<br>NY | Zip Code<br>10507-0040 |
|-----------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>N/A | Occupation (for Individual)<br>Retired |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 07    | / | 2016        |

**Transaction ID : SA11AI.30756**

Amount of Each Receipt this Period  

|        |
|--------|
| 192.11 |
|--------|

Memo Item

**B. Nordhoff, Nancy, S., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 306

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Langley | State<br>WA | Zip Code<br>98260-0306 |
|-----------------|-------------|------------------------|

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

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

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2016        |

**Transaction ID : SA11AI.30757**

Amount of Each Receipt this Period  

|        |
|--------|
| 484.21 |
|--------|

Memo Item

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

Mailing Address 2900 N Quinlan Park Rd  
# 240/337

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Austin | State<br>TX | Zip Code<br>78732-6083 |
|----------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Not Employed | Occupation (for Individual)<br>Physician |
|---|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 02    | / | 2016        |

**Transaction ID : SA11AI.30758**

Amount of Each Receipt this Period  

|        |
|--------|
| 878.95 |
|--------|

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30756

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30757

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30758

Hillary Victory Fund 4

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 85 OF 144               |
|   | <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             |                              |

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

**A. Popat, Hasmit, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1901 Post Oak Blvd  
 City Houston State TX Zip Code 77056-3868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hascor International Occupation (for Individual) Founder & CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.30759**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

**B. Porter, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Old Coach Rd  
 City Norwich State VT Zip Code 05055-9619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2016  
**Transaction ID : SA11AI.30761**  
 Amount of Each Receipt this Period  
 60.53  
 Memo Item

**C. Porter, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Old Coach Rd  
 City Norwich State VT Zip Code 05055-9619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2016  
**Transaction ID : SA11AI.30762**  
 Amount of Each Receipt this Period  
 131.58  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30759

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30761

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30762

Hillary Victory Fund 4

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: PAGE 88 OF 144  
(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. Reed, Kevin, Dale, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 11th St  
 Apt 1  
 City San Francisco State CA Zip Code 94103-3736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Green Cross Occupation (for Individual) President  
 Receipt For: 16  
 Primary     General  
 Other (specify) ▼ 2  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.30763**  
 Amount of Each Receipt this Period  
 57.90  
 Memo Item

**B. Reed, Kevin, Dale, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 11th St  
 Apt 1  
 City San Francisco State CA Zip Code 94103-3736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Green Cross Occupation (for Individual) President  
 Receipt For: 16  
 Primary     General  
 Other (specify) ▼ 2  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2016  
**Transaction ID : SA11AI.30764**  
 Amount of Each Receipt this Period  
 139.47  
 Memo Item

**C. Regan, Amy, Harper, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 189 Woosamonsa Rd  
 City Pennington State NJ Zip Code 08534-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For: 16  
 Primary     General  
 Other (specify) 2  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2016  
**Transaction ID : SA11AI.30765**  
 Amount of Each Receipt this Period  
 53.68  
 Memo Item

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30763

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30764

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30765

Hillary Victory Fund 4

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 91 OF 144  |
| <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. Rising, Nelson, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 435 Georgian Rd  
 City La Canada Flintridge State CA Zip Code 91011-3545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rising Real Estate Group Occupation (for Individual) Chief Executive Officer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.30767**  
 Amount of Each Receipt this Period  
 850.01  
 Memo Item

**B. Rivers, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 257 W 86th St 9D  
 City New York State NY Zip Code 10024-3105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Angel Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2016  
**Transaction ID : SA11AI.30768**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

**C. Rosette, Robert, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 565 W Chandler Blvd  
 City Chandler State AZ Zip Code 85225-7535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rosette, LLP Occupation (for Individual) Attorney  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2016  
**Transaction ID : SA11AI.30770**  
 Amount of Each Receipt this Period  
 26.32  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30767

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30768

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30770

Hillary Victory Fund 4

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 94 OF 144  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Rusi, Selim, , , Sr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 Benedict Rd  
 City Staten Island State NY Zip Code 10304-1205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Platinum Maintenance Services Corporat Occupation (for Individual) President  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : SA11AI.30771**  
 Amount of Each Receipt this Period  
 789.48  
 Memo Item

**B. Ryave, Ruth, Gottlieb King, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 Plymouth Rd  
 City Gwynedd Valley State PA Zip Code 19437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2016  
**Transaction ID : SA11AI.30772**  
 Amount of Each Receipt this Period  
 0.53  
 Memo Item

**C. Sargsyan, Edgar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13854 Albers St  
 City Sherman Oaks State CA Zip Code 91401-5811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regdalian Group Occupation (for Individual) Attorney  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2016  
**Transaction ID : SA11AI.30773**  
 Amount of Each Receipt this Period  
 813.16  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30771

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30772

Hillary Victory Fund 4

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.30773

Hillary Victory Fund 4

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:             | PAGE 97 OF 144               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <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. Schaefer, Bonnie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2070 N Ocean Blvd  
 Apt 2  
 City Boca Raton State FL Zip Code 33431-8304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Westglow Resort & Spa Occupation (for Individual) Business Owner  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2016  
**Transaction ID : SA11AI.30775**  
 Amount of Each Receipt this Period  
 807.90  
 Memo Item

**B. Scheide, Mary, Judith, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 133 Library Pl  
 City Princeton State NJ Zip Code 08540-3019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.30777**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**C. Schuster, Elaine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Jungle Rd  
 City Palm Beach State FL Zip Code 33480-4809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Philanthropist  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2016  
**Transaction ID : SA11AI.30778**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30775

Hillary Victory Fund 4

Form/Schedule: SA11AI

Transaction ID: SA11AI.30777

Hillary Victory Fund 4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30778

\* In-Kind: Catering, Food & Beverages

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 100 OF 144              |
|   | <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             | <input type="checkbox"/> 17  |

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

**A. Sheller, Sandy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 S 18th St  
 PH 1802  
 City Philadelphia State PA Zip Code 19103-6162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Sheller Family Foundation Occupation (for Individual) President  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2016  
**Transaction ID : SA11AI.30780**  
 Amount of Each Receipt this Period  
 131.58  
 Memo Item

**B. Smith, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2005 N Hancock St  
 City Arlington State VA Zip Code 22201-5114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2016  
**Transaction ID : SA11AI.30782**  
 Amount of Each Receipt this Period  
 126.32  
 Memo Item

**C. Snyder, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 Madison Ave  
 Ste 1302  
 City New York State NY Zip Code 10022-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HBJ Investments Occupation (for Individual) Principal  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2016  
**Transaction ID : SA11AI.30783**  
 Amount of Each Receipt this Period  
 4.74  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30780

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30782

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30783

Hillary Victory Fund

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 103 OF 144   |
| <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. Stephens, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 255 N Saltair Ave  
 City Los Angeles State CA Zip Code 90049-2912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Actress  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2016  
**Transaction ID : SA11AI.30784**  
 Amount of Each Receipt this Period  
 26.32  
 Memo Item

**B. Stephens, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 255 N Saltair Ave  
 City Los Angeles State CA Zip Code 90049-2912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Actress  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2016  
**Transaction ID : SA11AI.30785**  
 Amount of Each Receipt this Period  
 1.97  
 Memo Item

**C. Stetson, Eugene, William, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Elm St  
 City Norwich State VT Zip Code 05055-9445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Enviromental Film Documentarian  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2016  
**Transaction ID : SA11AI.30786**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30784

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30785

Hillary Victory Fund



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.30786

Hillary Victory Fund

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 106 OF 144   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Steyer, Thomas, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Lagoon Dr  
 Ste 400  
 City Redwood City State CA Zip Code 94065-5157  
 Name of Employer (for Individual) Fahr LLC Occupation (for Individual) Managing Partner  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 08 / 29 / 2016  
**Transaction ID : SA11AI.30787**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**B. Taylor, Kathryn, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Sutter St  
 FI 10  
 City San Francisco State CA Zip Code 94104-4527  
 Name of Employer (for Individual) Beneficial State Bank Occupation (for Individual) CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 10 / 12 / 2016  
**Transaction ID : SA11AI.30788**  
 Amount of Each Receipt this Period  
 878.95  
 Memo Item

**C. Thompson Marquez, Jacqueline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8360 Greensboro Dr  
 Unit 201  
 City McLean State VA Zip Code 22102-3553  
 Name of Employer (for Individual) EVS Communications, Inc. Occupation (for Individual) President  
 Receipt For: 16  
 Primary  General  
 Other (specify) 2  
 Aggregate Year-to-Date

Date of Receipt  
 11 / 07 / 2016  
**Transaction ID : SA11AI.30789**  
 Amount of Each Receipt this Period  
 71.05  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30787

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30788

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30789

Hillary Victory Fund

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 109 OF 144   |
| <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. Tobias, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Central Park W  
 City New York State NY Zip Code 10023-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2016  
**Transaction ID : SA11AI.30790**  
 Amount of Each Receipt this Period  
 302.63  
 Memo Item

**B. Tobias, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Central Park W  
 City New York State NY Zip Code 10023-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2016  
**Transaction ID : SA11AI.30791**  
 Amount of Each Receipt this Period  
 131.58  
 Memo Item

**C. Tobias, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Central Park W  
 City New York State NY Zip Code 10023-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2016  
**Transaction ID : SA11AI.30792**  
 Amount of Each Receipt this Period  
 444.74  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30790

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30791

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30792

Hillary Victory Fund

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 112 OF 144   |
| <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. Vitello, Gwynned, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 785 Willborough Rd

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Burlingame | State<br>CA | Zip Code<br>94010-3718 |
|--------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Media Publisher |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 21    | / | 2016        |

**Transaction ID : SA11AI.30795**

Amount of Each Receipt this Period  

|       |
|-------|
| 71.05 |
|-------|

Memo Item

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

Mailing Address 785 Willborough Rd

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Burlingame | State<br>CA | Zip Code<br>94010-3718 |
|--------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Media Publisher |
|--|--|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 07    | / | 2016        |

**Transaction ID : SA11AI.30796**

Amount of Each Receipt this Period  

|       |
|-------|
| 57.90 |
|-------|

Memo Item

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

Mailing Address 58 Commonwealth Ave

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Boston | State<br>MA | Zip Code<br>02116-3003 |
|----------------|-------------|------------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>Self-Employed | Occupation (for Individual)<br>Consultant |
|--|---|

Receipt For: 16  
 Primary  General  
 Other (specify) **2**

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 02    | / | 2016        |

**Transaction ID : SA11AI.30797**

Amount of Each Receipt this Period  

|        |
|--------|
| 219.29 |
|--------|

Memo Item

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30795

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30796

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30797

Hillary Victory Fund

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 115 OF 144   |
| <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. Welland, David, Reid, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2512 Janice Dr  
 City Austin State TX Zip Code 78703-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Silicon Laboratories Occupation (for Individual) Engineer  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2016  
**Transaction ID : SA11AI.30799**  
 Amount of Each Receipt this Period  
 568.43  
 Memo Item

**B. Wilbourn, Mack, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1709 Friar Tuck Rd NE  
 City Atlanta State GA Zip Code 30309-2613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mack II Inc. Occupation (for Individual) President  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2016  
**Transaction ID : SA11AI.30800**  
 Amount of Each Receipt this Period  
 12.71  
 Memo Item

**C. Williams, Constance, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 307 Brentford Rd  
 City Haverford State PA Zip Code 19041-1718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2016  
**Transaction ID : SA11AI.30801**  
 Amount of Each Receipt this Period  
 263.16  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30799

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30800

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30801

Hillary Victory Fund

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 118 OF 144 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 12<br><input type="checkbox"/> 13<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15<br><input type="checkbox"/> 16<br><input type="checkbox"/> 17 |                 |

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

**A. Wolf, David, Eitan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1064 Whitetail Dr  
 City Mandeville State LA Zip Code 70448-1996  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Private Investor  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2016  
**Transaction ID : SA11AI.30803**  
 Amount of Each Receipt this Period  
 192.11  
 Memo Item

**B. Xu, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 505 Los Altos Ave  
 City Arcadia State CA Zip Code 91007-8335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mebo International Occupation (for Individual) CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2016  
**Transaction ID : SA11AI.30804**  
 Amount of Each Receipt this Period  
 192.11  
 Memo Item

**C. Xu, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 505 Los Altos Ave  
 City Arcadia State CA Zip Code 91007-8335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mebo International Occupation (for Individual) CEO  
 Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
 Aggregate Year-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2016  
**Transaction ID : SA11AI.30805**  
 Amount of Each Receipt this Period  
 686.85  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30803

Hillary Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.30804

Hillary Victory Fund

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30805

Hillary Victory Fund

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: PAGE 121 OF 144  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
 Yap, Julian, , ,

Mailing Address 199 Mott St  
 Apt 6B

City New York    State NY    Zip Code 10012-4689

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

Name of Employer (for Individual) Serial Box Publishing    Occupation (for Individual) Attorney

Receipt For: 16  
 Primary     General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2016

**Transaction ID : SA11AI.30807**

Amount of Each Receipt this Period  
 52.63

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.30807

Hillary Victory Fund

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: PAGE 123 OF 144  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. California Democratic Party**  
Mailing Address 1830 9th St  
City Sacramento State CA Zip Code 95811-7012  
FEC ID number of contributing federal political committee. **C** C00105668  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For: 16  
 Primary  General  
 Other (specify) **2**  
Aggregate Year-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2016**  
**Transaction ID : SA11B.30808**  
Amount of Each Receipt this Period  
**1728.17**  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  
 Primary  General  
 Other (specify)  
Aggregate Year-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  
 Primary  General  
 Other (specify)  
Aggregate Year-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11B

Transaction ID : SA11B.30808

Hillary Victory Fund

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 125 OF 144   |
| <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**

**A. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 20    | / | 2016        |

**Transaction ID : SA11C.30809**

Amount of Each Receipt this Period  

|       |
|-------|
| 24.75 |
|-------|

 Memo Item

**B. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 25    | / | 2016        |

**Transaction ID : SA11C.30810**

Amount of Each Receipt this Period  

|       |
|-------|
| 14.68 |
|-------|

 Memo Item

**C. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 27    | / | 2016        |

**Transaction ID : SA11C.30811**

Amount of Each Receipt this Period  

|       |
|-------|
| 19.25 |
|-------|

 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.30809

\* In-Kind: Transportation

Form/Schedule: SA11C

Transaction ID: SA11C.30810

\* In-Kind: Transportation

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.30811

\* In-Kind: Transportation

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 128 OF 144   |
| <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 |

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

**A. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 31    |   | 2016        |

**Transaction ID : SA11C.30812**

Amount of Each Receipt this Period  

|       |
|-------|
| 49.08 |
|-------|

 Memo Item

**B. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 08    |   | 2016        |

**Transaction ID : SA11C.30813**

Amount of Each Receipt this Period  

|       |
|-------|
| 24.54 |
|-------|

 Memo Item

**C. Kaine for Virginia**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 12307

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23241-0307 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00495358

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

Receipt For: 16  
 Primary  General  
 Other (specify) ▼ 2

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 08    |   | 2016        |

**Transaction ID : SA11C.30814**

Amount of Each Receipt this Period  

|        |
|--------|
| 347.37 |
|--------|

 Memo Item

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



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

Form/Schedule: SA11C

Transaction ID : SA11C.30812

\* In-Kind: Payroll & Fees

Form/Schedule: SA11C

Transaction ID: SA11C.30813

\* In-Kind: Payroll & Fees

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.30814

\* In-Kind: Fundraising Consulting

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: PAGE 131 OF 144  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Democratic National Committee**

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 9792.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2017

**Transaction ID : SA12.30619**

Amount of Each Receipt this Period  
 3435.00

Memo Item  
 Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Democratic National Committee**

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 12733.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2017

**Transaction ID : SA12.30662**

Amount of Each Receipt this Period  
 2941.17

Memo Item  
 In-kind - Voter File Access

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HILLARY VICTORY FUND**

Mailing Address PO BOX 5256

City NEW YORK State NY Zip Code 10185

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2017

**Transaction ID : SA12.30664**

Amount of Each Receipt this Period  
 25000.00

Memo Item  
 Fundraiser Proceeds

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 31376.17 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 31376.17 |

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

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

FOR LINE NUMBER: PAGE 132 OF 144  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**VLM Cooperative Inc.**

Mailing Address **PO Box 9**

City **Lexington** State **KY** Zip Code **40588**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **793.14**

Date of Receipt  
**02 / 27 / 2017**

**Transaction ID : SA17.30620**

Amount of Each Receipt this Period  
**793.14**

Memo Item  
 Voter File Proceeds

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>793.14</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>793.14</b> |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. CitiBusiness Card**

Mailing Address PO Box 182564

City Columbus State OH Zip Code 43210

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
2131.03

Memo Item

Full Name (Last, First, Middle Initial)

**B. Avvio Ristorante**

Mailing Address 90 Hillside Drive

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Meeting Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
320.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hanley's Ale House**

Mailing Address 52 Pine Street

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Meeting Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
89.00

Memo Item

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

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

2131.03

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Providence G**

Mailing Address 61 Orange Street

City Providence State RI Zip Code 02903

Purpose of Disbursement Meeting Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
01 / 26 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'Dinis Restaurant**

Mailing Address 579 Warren Avenue

City East Providence State RI Zip Code 02914

Purpose of Disbursement Meeting Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
01 / 30 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
360.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Chapel Grille**

Mailing Address 3000 Chapel View Boulevard

City Cranston State RI Zip Code 02920

Purpose of Disbursement Meeting Miles

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.30611  
Amount of Each Disbursement this Period  
390.00

Memo Item

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

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

0.00

**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"/> 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. Delta Airlines**

Mailing Address TFG Airport

City Warwick State RI Zip Code 02886

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2017

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.30607**  
Amount of Each Disbursement this Period  
[ ] 409.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number

C C00010603  
**Transaction ID : SB21B.30663**  
Amount of Each Disbursement this Period  
[ ] 2941.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gooding, Ann, , ,**

Mailing Address 265 Narragansett Bay Avenue

City Warwick State RI Zip Code 02889

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2017

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.30612**  
Amount of Each Disbursement this Period  
[ ] 1233.73

Memo Item

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

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

[ ] 4584.25

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Service**

Mailing Address PO Box 660351

City  
Dallas

State  
TX

Zip Code  
75266

Purpose of Disbursement  
Federal Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 5 |   | 2 | 0 | 1 | 7 |

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30614**  
 Amount of Each Disbursement this Period  
 [ ] 767.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. McNamara, Joseph, , ,**

Mailing Address 23 Howie Ave

City  
Warwick

State  
RI

Zip Code  
02888

Purpose of Disbursement  
Reimbursement

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 |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 1 | 7 |

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30617**  
 Amount of Each Disbursement this Period  
 [ ] 1461.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. Westin Peachtree**

Mailing Address 210 Peactree St NW

City  
Atlanta

State  
GA

Zip Code  
30303

Purpose of Disbursement  
Lodging

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 |
| 0 | 2 |   | 2 | 6 |   | 2 | 0 | 1 | 7 |

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30617**  
 Amount of Each Disbursement this Period  
 [ ] 756.32

Memo Item

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

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 2 | 2 | 9 | 8 | 0 |
|---|---|---|---|---|---|

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|



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

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

FOR LINE NUMBER:  
(check only one)

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

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. Delta Airlines**

Mailing Address TFG Airport

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 6 |   | 2 | 0 | 1 | 7 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.30617

Amount of Each Disbursement this Period

473.60

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

0.00

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

8945.08

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

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

FOR LINE NUMBER:  
(check only one)

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

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. Democratic National Committee**

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

City Washington State DC Zip Code 20003

Purpose of Disbursement Transfer

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number: C C00010603  
Transaction ID : SB22.30665  
Amount of Each Disbursement this Period: 25000.00

Memo Item

**B.**

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

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

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

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 25000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 25000.00 |

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

**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)<br>Licht 88 Committee |             | <input checked="" type="checkbox"/> Memo Item | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 350 Cole Avenue  |             |   |   |
| City<br>Providence   | State<br>RI | ZIP Code<br>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<br>MM / DD / YYYY<br>12 / 31 / 1988 | Date Due<br>MM / DD / YYYY | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|----------------------------|-------------------------------|---|

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

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

|   |         |
|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 5249.87 |
| <b>TOTALS</b> 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 140 OF 144                   |
|   | 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<br><b>WHITEHOUSE, SHELDON II, , ,</b> |             |                   | Nature of Debt (Purpose):<br>Coordinated expenditures overage |
| Mailing Address PO BOX 40280   |             |                   |   |
| City<br>PROVIDENCE   | State<br>RI | Zip Code<br>02940 |   |

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

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

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

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

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

|  |         |
|--|---------|
| 1) <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                   | DATE OF RECEIPT                  | TOTAL AMOUNT TRANSFERRED |
|-----------------------------------|----------------------------------|--------------------------|
| RI Democratic Non-federal Account | MM / DD / YYYY<br>02 / 26 / 2017 | 4934.98                  |

**BREAKDOWN OF TRANSFER RECEIVED**

|  |         |
|--|---------|
| <b>i) Total Administrative</b> .....   | 4934.98 |
| <b>Transaction ID : H3.30629</b>   |         |
| <b>ii) Generic Voter Drive</b> .....   |         |
| <b>iii) Exempt Activities</b> .....  |         |
| <b>iv) Direct Fundraising</b> (List Activity or Event Identifier)            |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Fundraising .....                     |         |
| <b>v) Direct Candidate Support</b> (List Activity or Event Identifier)       |         |
| a) _____   |         |
| b) _____   |         |
| c) Total Amount Transferred For Direct Candidate Support.....                |         |
| <b>vi) Public Communications Referring Only to Party</b> (Made by PAC) ..... |         |

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

|  |         |
|--|---------|
| <b>TOTAL</b> This Period (Administrative) .....                                | 4934.98 |
| <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).....                       | 4934.98 |

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 : H4.30621
Pier Pizza
Mailing Address 2763 Post Road
City Warwick State RI Zip Code 02886
Purpose of Disbursement: Meeting Refreshments
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 6338.71
Date 02 / 10 / 2017
FEDERAL SHARE 19.30 + NONFEDERAL SHARE 72.59 = TOTAL AMOUNT 91.89

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30622
Lehigh Realty
Mailing Address One Realty Way
City East Providence State RI Zip Code 02914
Purpose of Disbursement: Rent and CAM
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 7624.04
Date 02 / 12 / 2017
FEDERAL SHARE 269.92 + NONFEDERAL SHARE 1015.41 = TOTAL AMOUNT 1285.33

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30623
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Phone Internet and Cable
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 7857.31
Date 02 / 12 / 2017
FEDERAL SHARE 48.99 + NONFEDERAL SHARE 184.28 = TOTAL AMOUNT 233.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 338.21, 1272.28, 1610.49

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

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.30624. Lehigh Realty. Mailing Address One Realty Way. City East Providence, State RI, Zip Code 02914. Purpose of Disbursement: Utilities. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/12/2017. Year-To-Date: 7994.25. Summary: FEDERAL SHARE 28.76, NONFEDERAL SHARE 108.18, TOTAL AMOUNT 136.94.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.30625. Della Rosa, Susann, , . Mailing Address 60 Don Avenue. City Rumford, State RI, Zip Code 02916. Purpose of Disbursement: Accounting services (Non-employee). Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/12/2017. Year-To-Date: 9344.25. Summary: FEDERAL SHARE 283.50, NONFEDERAL SHARE 1066.50, TOTAL AMOUNT 1350.00.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.30626. Staples. Mailing Address 1800 Post Road. City Warwick, State RI, Zip Code 02886. Purpose of Disbursement: Office Supplies. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/14/2017. Year-To-Date: 9445.63. Summary: FEDERAL SHARE 21.29, NONFEDERAL SHARE 80.09, TOTAL AMOUNT 101.38.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 333.55, 1254.77, 1588.32.

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

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

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.30627**  Memo Item

**Gooding, Ann, , ,**

Mailing Address 265 Narragansett Bay Avenue

City Warwick State RI Zip Code 02889

Purpose of Disbursement: Net Wages

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: 10679.36

Date: 02 / 28 / 2017

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 259.08        |   | 974.65           |   | 1233.73      |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.30628**  Memo Item

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

Allocated Activity or Event Year-To-Date: 10738.24

Date: 02 / 28 / 2017

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.36         |   | 46.52            |   | 58.88        |

**C.** Full Name (Last, First, Middle Initial)  Memo Item

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 |
| 271.44        |   | 1021.17          |   | 1292.61      |

**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 |
| 943.20        |  | 3548.22          |  | 4491.42      |