

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Rhode Island Democratic State Committee

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

2. FEC IDENTIFICATION NUMBER C00136200 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (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), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 01 2010 through 01 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jeffrey Padwa Signature of Treasurer Electronically Filed by Jeffrey Padwa Date 12 02 2010

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

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XA**

The loan on Schedule C has no interest rate and no determined due date.

Transaction ID :

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

Write or Type Committee Name  
Rhode Island Democratic State Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		38161.84
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	38161.84									
(c) Total Receipts (from Line 19) .....	13388.58	13388.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	51550.42	51550.42								
7. Total Disbursements (from Line 31) .....	24695.76	24695.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	26854.66	26854.66								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	5254.47									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Rhode Island Democratic State Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	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	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	8220.00	8220.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	5168.58	5168.58
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	5168.58	5168.58
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	13388.58	13388.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8220.00	8220.00

## DETAILED SUMMARY PAGE

of Disbursements

5 / 27

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1592.10	1592.10
(ii) Non-Federal Share.....	9021.89	9021.89
(b) Other Federal Operating Expenditures.....	3349.69	3349.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	13963.68	13963.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	10732.08	10732.08
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10732.08	10732.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24695.76	24695.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15673.87	15673.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 27

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4941.79	4941.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4941.79	4941.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 27
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 15
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<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.**

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol St. SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 0 1 / 1 6 / 2 0 1 0
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA12.16418
C C00010603		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

**B.**

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol St. SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 0 1 / 2 0 / 2 0 1 0
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA12.16419
C C00010603		Amount of Each Receipt this Period
		3220.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	8220.00	

In-kind - Voter file access

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8220.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8220.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 27

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

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

A.

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

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind - Voter file access

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.16420

Date of Disbursement

01 / 20 / 2010

Amount of Each Disbursement this Period

3220.00

SUBTOTAL of Disbursements This Page (optional) ▶

3220.00

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

3220.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 27

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

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

A.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island	Transaction ID: SB30B.16377 Date of Disbursement
	Mailing Address PO Box 1057	<input type="text" value="01"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Providence State RI Zip Code 02901	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Health Insurance	<input type="text" value="241.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Department of Employment & Training	Transaction ID: SB30B.16376 Date of Disbursement
	Mailing Address One Capitol Hill	<input type="text" value="01"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Providence State RI Zip Code 02908	Amount of Each Disbursement this Period
	Purpose of Disbursement State unemployment taxes	<input type="text" value="354.27"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Division of Taxation	Transaction ID: SB30B.16375 Date of Disbursement
	Mailing Address One Capitol Hill	<input type="text" value="01"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Providence State RI Zip Code 02908	Amount of Each Disbursement this Period
	Purpose of Disbursement State Withholding Taxes	<input type="text" value="447.68"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1043.72"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 27

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

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

A.	Full Name (Last, First, Middle Initial) Timothy Grilo	Transaction ID: SB30B.16373 Date of Disbursement 01 / 15 / 2010
	Mailing Address 481 Charles Street	
	City Providence State RI Zip Code 02904	Amount of Each Disbursement this Period 1857.20
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Timothy Grilo	Transaction ID: SB30B.16374 Date of Disbursement 01 / 29 / 2010
	Mailing Address 481 Charles Street	
	City Providence State RI Zip Code 02904	Amount of Each Disbursement this Period 1857.20
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Raymond J Sullivan, Jr.	Transaction ID: SB30B.16371 Date of Disbursement 01 / 15 / 2010
	Mailing Address 2 Cornell Court	
	City Coventry State RI Zip Code 02816	Amount of Each Disbursement this Period 1435.87
	Purpose of Disbursement Net wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5150.27
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Raymond J Sullivan, Jr.	Transaction ID: SB30B.16372 Date of Disbursement 01 / 29 / 2010
	Mailing Address 2 Cornell Court	Amount of Each Disbursement this Period 1435.87
	City Coventry State RI Zip Code 02816	
	Purpose of Disbursement Net wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB30B.16370 Date of Disbursement 01 / 15 / 2010
	Mailing Address PO Box 660351	Amount of Each Disbursement this Period 2990.22
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Payroll tax deposit	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB30B.16381 Date of Disbursement 01 / 26 / 2010
	Mailing Address PO Box 660351	Amount of Each Disbursement this Period 112.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement FUTA deposit	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4538.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>10732.08</b>

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

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

**LOANS**

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

**Transaction ID: SC/9.5183**

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

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

**TERMS**

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

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

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

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

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

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SHELDON II WHITEHOUSE

Nature of Debt (Purpose):  
Coordinated expenditures overage

Mailing Address 32 ELMGROVE AVENUE

City	State	ZIP Code
PROVIDENCE	RI	02906

Outstanding Balance Beginning This Period

4.60
------

Transaction ID: SD9.14176

Amount Incurred This Period

0.00
------

Payment This Period

0.00
------

Outstanding Balance at Close of This Period

4.60
------

1) **SUBTOTALS** This Period This Page (optional)..... ▶

4.60
------

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

4.60
------

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

5249.87
---------

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

5254.47
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**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

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

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

NAME OF ACCOUNT RI Democratic Non-federal Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 5168.58
--	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	5168.58	Transaction ID: H3.16421
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	5168.58
<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) .....	5168.58

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Cox Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 157.00		
City Newark	State NJ	Zip Code 07101	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Monthly modem and cable			Transaction ID: H4.16363		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.55		133.45		157.00

<b>B. Full Name (Last, First, Middle Initial)</b> Susann Della Rosa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 60 Don Avenue			Allocated Activity or Event Year-To-Date 1432.00		
City Rumford	State RI	Zip Code 02916	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Accounting Services-non employee			Transaction ID: H4.16364		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
191.25		1083.75		1275.00

<b>C. Full Name (Last, First, Middle Initial)</b> IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 30069			Allocated Activity or Event Year-To-Date 1474.72		
City Hartford	State CT	Zip Code 06150	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Copier maintenance fees			Transaction ID: H4.16366		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.41		36.31		42.72

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.21		1253.51		1474.72

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Pui O			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 249 Roosevelt Avenue			Allocated Activity or Event Year-To-Date 2274.72		
City Pawtucket	State RI	Zip Code 02860	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: January rent & electricity			Transaction ID: H4.16367		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.00		680.00		800.00

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 2510.26		
City Albany	State NY	Zip Code 12250	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Telephone service			Transaction ID: H4.16368		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.33		200.21		235.54

<b>C. Full Name (Last, First, Middle Initial)</b> A T & T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 536216			Allocated Activity or Event Year-To-Date 2662.02		
City Atlanta	State GA	Zip Code 30353	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Cell phone service			Transaction ID: H4.16379		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.76		129.00		151.76

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.09		1009.21		1187.30

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 13337			Allocated Activity or Event Year-To-Date 8810.97	
City Philadelphia	State PA	Zip Code 19101	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Credit card payment			Category/Type Transaction ID: H4.16382	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
922.34		5226.61		6148.95

<b>B. Full Name (Last, First, Middle Initial)</b> BWI Taxi Management			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Baltimore/Washington Airport			Allocated Activity or Event Year-To-Date 0.00	
City Baltimore	State MD	Zip Code 21240	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Taxi service			Category/Type Transaction ID: H4.16385	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.57		82.58		97.15

<b>C. Full Name (Last, First, Middle Initial)</b> Silver Diner BWI			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7590 Friendship Road			Allocated Activity or Event Year-To-Date 0.00	
City BWI Airport	State MD	Zip Code 21240	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Travel meals			Category/Type Transaction ID: H4.16386	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.07		23.09		27.16

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
922.34		5226.61		6148.95

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

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

Mailing Address  
1331 Pennsylvania Avenue, NW

City	State	Zip Code	Category/ Type
Washington	DC	20004	

Purpose of Disbursement:  
Travel meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date 

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

Transaction ID: H4.16388

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.79		44.11		51.90

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

Mailing Address  
923 16th and K Streets NW

City	State	Zip Code	Category/ Type
Washington	DC	20006	

Purpose of Disbursement:  
Lodging and meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date 

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

Transaction ID: H4.16390

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.69		706.59		831.28

**C. Full Name (Last, First, Middle Initial)**  
Providence Airport QPS

Mailing Address  
2000 Post Road

City	State	Zip Code	Category/ Type
Warwick	RI	02886	

Purpose of Disbursement:  
Airport Parking

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date 

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

Transaction ID: H4.16393

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Alamo Rent A Car

Mailing Address  
600 Terminal Road

City State Zip Code  
Ft Lauderdale FL 33315

Purpose of Disbursement:  
Car rental

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 14 / 2010

Transaction ID: H4.16395

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.94		571.98		672.92

**B. Full Name (Last, First, Middle Initial)**  
Fontainebleau Resort

Mailing Address  
4441 Collins Ave

City State Zip Code  
Miami Beach FL 33140

Purpose of Disbursement:  
Lodging and meals

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 14 / 2010

Transaction ID: H4.16397

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
572.33		3243.21		3815.54

**C. Full Name (Last, First, Middle Initial)**  
Providence Place Mall

Mailing Address  
One Providence Place

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Gift cards

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 14 / 2010

Transaction ID: H4.16398

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.35		517.65		609.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Card Services  
Mailing Address  
PO Box 13337  
City State Zip Code  
Philadelphia PA 19101  
Purpose of Disbursement:  
Credit card payment  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
9539.72  
Date 01 / 14 / 2010  
Transaction ID: H4.16383

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.31		619.44		728.75

**B. Full Name (Last, First, Middle Initial)**  
Fontainebleau Resort  
Mailing Address  
4441 Collins Ave  
City State Zip Code  
Miami Beach FL 33140  
Purpose of Disbursement:  
Lodging  
Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
0.00  
Date 01 / 14 / 2010  
Transaction ID: H4.16399

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.75		349.90		411.65

**C. Full Name (Last, First, Middle Initial)**  
Providence Airport QPS  
Mailing Address  
2000 Post Road  
City State Zip Code  
Warwick RI 02886  
Purpose of Disbursement:  
Airport parking  
Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
0.00  
Date 01 / 14 / 2010  
Transaction ID: H4.16400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.22		35.22		41.44

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.31		619.44		728.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
TIVO Store

Mailing Address  
2160 Gold Street

City	State	Zip Code
Alviso	CA	95002

Purpose of Disbursement:  
TIVO service

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 14 / 2010

Transaction ID: H4.16401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.87		22.03		25.90

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

Mailing Address  
Turnkey Station

City	State	Zip Code
Providence	RI	02940

Purpose of Disbursement:  
Office postage

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 14 / 2010

Transaction ID: H4.16402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

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

Mailing Address  
551 North Main Street

City	State	Zip Code
Providence	RI	02906

Purpose of Disbursement:  
Office supplies

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 01 / 05 / 2010

Transaction ID: H4.16403

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.42		36.37		42.79

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Constant Contact

Mailing Address  
1601 Trapelo Road

City	State	Zip Code	
Waltham	MA	02451	

Purpose of Disbursement: E mail listings	Category/ Type

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date  
0.00

Date 01 / 07 / 2010

Transaction ID: H4.16404

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		29.75		35.00

**B. Full Name (Last, First, Middle Initial)**  
Card Services

Mailing Address  
PO Box 13337

City	State	Zip Code	
Philadelphia	PA	19101	

Purpose of Disbursement: Card fees	Category/ Type

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date  
0.00

Date 01 / 04 / 2010

Transaction ID: H4.16405

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.14		46.13		54.27

**C. Full Name (Last, First, Middle Initial)**  
Supernice Taxis

Mailing Address  
2766 NW 62nd Street

City	State	Zip Code	
Miami	FL	33147	

Purpose of Disbursement: Taxi service	Category/ Type

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date  
0.00

Date 01 / 14 / 2010

Transaction ID: H4.16406

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.06		62.64		73.70

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 30069			Allocated Activity or Event Year-To-Date 9762.72		
City Hartford	State CT	Zip Code 06150	Date MM / DD / YYYY 01 / 26 / 2010		
Purpose of Disbursement: Copier Lease			Transaction ID: H4.16365		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.45		189.55		223.00

<b>B. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 South Riverside Plaza			Allocated Activity or Event Year-To-Date 10613.99		
City Chicago	State IL	Zip Code 60606	Date MM / DD / YYYY 01 / 26 / 2010		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.16384		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.70		723.57		851.27

<b>C. Full Name (Last, First, Middle Initial)</b> Cafe Nuovo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 Citizens Plaza			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 01 / 26 / 2010		
Purpose of Disbursement: Meeting 12/22/09			Transaction ID: H4.16408		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.66		139.71		164.37

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.15		913.12		1074.27

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

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

**A. Full Name (Last, First, Middle Initial)**  
Parkside Rotisserie

Mailing Address  
76 South Main Street

City	State	Zip Code
Providence	RI	02903

Category/  
Type

Purpose of Disbursement:  
Meeting 12/23/09

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 26 / 2010

Transaction ID: H4.16409

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.74		32.55		38.29

**B. Full Name (Last, First, Middle Initial)**  
Local 121 Restaurant

Mailing Address  
121 Washington Street

City	State	Zip Code
Providence	RI	02903

Category/  
Type

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 04 / 2010

Transaction ID: H4.16410

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.27		80.83		95.10

**C. Full Name (Last, First, Middle Initial)**  
McCormick & Schmick

Mailing Address  
11 Dorrance Street

City	State	Zip Code
Providence	RI	02903

Category/  
Type

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Date 01 / 06 / 2010

Transaction ID: H4.16411

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.06		51.33		60.39

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Siena Restaurant

Mailing Address  
238 Atwells Avenue

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 01 / 12 / 2010

Transaction ID: H4.16412

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.09		57.15		67.24

**B. Full Name (Last, First, Middle Initial)**  
Salvatore's Cafe

Mailing Address  
265 Atwells Avenue

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 01 / 13 / 2010

Transaction ID: H4.16413

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.92		33.56		39.48

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

Mailing Address  
311 Westminster Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 01 / 13 / 2010

Transaction ID: H4.16415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.64		26.28		30.92

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Camille's

Mailing Address  
71 Bradford Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

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

Allocated Activity or Event Year-To-Date  
0.00

Date 01 / 14 / 2010

Transaction ID: H4.16416

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.22		57.94		68.16

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

Mailing Address  
One West Exchange Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement:  
Meeting 12/1/09

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

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

Allocated Activity or Event Year-To-Date  
0.00

Date 01 / 26 / 2010

Transaction ID: H4.16417

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.10		244.22		287.32

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
1592.10		9021.89		10613.99