



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Cicilline Committee**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46708.66	1576228.99
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	7356.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	46708.66	1568872.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	107958.70	863067.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	4000.00	17051.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	103958.70	846016.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	782281.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Cicilline Committee

Report Covering the Period: From: 10 / 18 / 2018 To: 11 / 26 / 2018

I. RECEIPTS

COLUMN A Total this Period

COLUMN B Election Cycle Total as of

COLUMN C Total for

11 / 06 / 2018 (date of general election)

11 / 07 / 2018 (date after general election)

through

11 / 26 / 2018 (last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
  - (i) Itemized (use Schedule A)

24498.00

1061391.80

1000.00

(ii) Unitemized

1658.42

66309.89

180.00

(iii) Total of contributions from individuals

26156.42

1127701.75

1180.00

(b) Political Party Committees

0.00

0.00

0.00

(c) Other Political Committees

20552.24

448527.24

0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
46708.66	1576228.99	1180.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
3725.22	20951.82	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
4000.00	17051.10	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	4173.39	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
54433.88	1618405.30	1180.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Cicilline Committee

 Report Covering the Period: From:   /   /   To:   /   /  
**II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="107958.70"/>	<input type="text" value="863067.13"/>	<input type="text" value="45881.93"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="10000.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="600.00"/>	<input type="text" value="600.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="600.00"/>	<input type="text" value="600.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="7356.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	7356.00	0.00
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**21. OTHER DISBURSEMENTS**

102375.00	718125.00	0.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

210933.70	1599148.13	45881.93
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

46708.66	1568872.99	1180.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

103958.70	846016.03	45881.93
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	938781.45
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	54433.88
25. SUBTOTAL (add Line 23 and Line 24).....	993215.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	210933.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	782281.63

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

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

FOR LINE NUMBER: PAGE 7 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Annaldo, Andrew, J., ,**  
Mailing Address 2 Beloit St  
City Providence State RI Zip Code 02908-1206  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Andrew Annaldo & Associates Occupation President  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018  
**Transaction ID : C10423960**  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Baccala, Ronald, R., ,**  
Mailing Address 10 E Lakeview Dr  
City Providence State RI Zip Code 02904  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Masello Salon Services of New England Occupation CEO  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018  
**Transaction ID : C10423962**  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Baptista, Ernest, P., , Jr.**  
Mailing Address 118 Crothers Avenue  
City Cranston State RI Zip Code 02910  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gencorp Insurance Occupation Salesman  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018  
**Transaction ID : C10423970**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 553 Bellevue Ave  
Apt 7

City Newport State RI Zip Code 02840-4270

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

Name of Employer N/A Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423965**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 170 Gentian Ave

City Providence State RI Zip Code 02908-1103

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

Name of Employer None Occupation Homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423953**

Amount of Each Receipt this Period  
300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Blazar, Steven, L., ,**

Mailing Address 72 Manning St

City Providence State RI Zip Code 02906-3104

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

Name of Employer Care New England medical group Occupation Surgeon

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 25 2018

Transaction ID : **C10416337**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00

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



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

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

FOR LINE NUMBER: PAGE 9 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bramley, Jennifer, K., ,**  
Mailing Address 150 Union Street, #506

City Providence State RI Zip Code 02903

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

Name of Employer Cox Communications Occupation Vice President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 06 / 2018

Transaction ID : **C10424004**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**brice, Sherry, J., ,**  
Mailing Address 8 Yznaga Ave

City Newport State RI Zip Code 02840-4239

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

Name of Employer Seaport Shines Occupation President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 18 / 2018

Transaction ID : **C10411683**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Bucci, Michael, A., ,**  
Mailing Address 54 Buckout Rd

City West Harrison State NY Zip Code 10604

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : **C10423959**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Chille, Alan, J., ,**  
 Mailing Address 24 Rogler Farm Rd  
 City Smithfield State RI Zip Code 02917-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Providence Performing Arts Center Occupation General Manager  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 30 2018  
**Transaction ID : C10423967**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Dufault, Guy, A., ,**  
 Mailing Address 45 Pardons Wood Ln  
 City East Greenwich State RI Zip Code 02818-1446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cornerstone Communications Group Occupation Public Relations Executive  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 30 2018  
**Transaction ID : C10423972**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Evans, Barnaby, M., ,**  
 Mailing Address 101 Regent Ave  
 City Providence State RI Zip Code 02908-5430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Waterfire Providence Occupation Artist  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 24 2018  
**Transaction ID : C10416279**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 1 Wayland Ave  
Apt 308

City Providence State RI Zip Code 02906-4566

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2018

Transaction ID : **C10416251**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Freeman, Mimi, M., ,**

Mailing Address 100 Alumni Ave

City Providence State RI Zip Code 02906

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

Name of Employer N/A Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

Transaction ID : **C10418491**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address 173 Belvedere Drive

City Cranston State RI Zip Code 02920

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : **C10423975**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2750.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 91 Lighthouse Dr

City Jupiter State FL Zip Code 33469-3511

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

Name of Employer Gilbane Building Company Occupation Construction Manager

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2018

**Transaction ID : C10420848**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 140 Blackstone Blvd

City Providence State RI Zip Code 02906-5626

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

Name of Employer self employed Occupation self employed

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2018

**Transaction ID : C10413287**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Goldstein, Larry, M., ,**

Mailing Address 140 Blackstone Blvd

City Providence State RI Zip Code 02906-5626

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

Name of Employer Goldstein associates Occupation real Estate

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2018

**Transaction ID : C10413286**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Gordon, Richard, S., ,**  
 Mailing Address 300 Saw Mill Ln  
 City Wyckoff State NJ Zip Code 07481-3218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gordon Law Firm, P.C. Occupation Attorney  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 23 2018  
**Transaction ID : C10414639**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Irons, William, V., ,**  
 Mailing Address 150 Prospect Rd  
 City Wakefield State RI Zip Code 02879-7044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irons and Associates Occupation President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 30 2018  
**Transaction ID : C10423957**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jones, Marcus, , ,**  
 Mailing Address 56 High St Apt 12  
 City North Attleboro State MA Zip Code 02760-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Attorney Occupation The Law Office of M. Jackson Jones  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2018  
**Transaction ID : C10411850**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 820.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 102  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Kinch, Lowell, W, ,**

Mailing Address 35 W Barn Rd

City North Attleboro	State MA	Zip Code 02760
-------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : C10423958**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Langlois, Marie, J., ,**

Mailing Address 123 Blackstone Blvd

City Providence	State RI	Zip Code 02906-5627
--------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : C10416618**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lavine, Barbara, S., ,**

Mailing Address 330 Freeman Pkwy

City Providence	State RI	Zip Code 02906-5741
--------------------	-------------	------------------------

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

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : C10423954**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Lopes, Leonard, L., ,**

Mailing Address 28 Bayley St  
Apt 501

City Pawtucket State RI Zip Code 02860-2986

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

Name of Employer The Victor Group Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

Transaction ID : **C10418499**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**McAndrew, Thomas, J., , Esq.**

Mailing Address 6 Wingate Rd

City Providence State RI Zip Code 02906-4910

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

Name of Employer Law Offices of Thomas J. McAndrew Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2018

Transaction ID : **C10424001**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 127 Pratt St

City Providence State RI Zip Code 02906-1412

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

Name of Employer Novacap TMT V Occupation Investor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2018

Transaction ID : **C10413283**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mongeon, Norbert, H., Jr.**  
 Mailing Address 329 Stillwater Rd  
 City Smithfield State RI Zip Code 02917-1864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Providence Performing Arts Center Occupation Director of Finance Programming  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2018  
**Transaction ID : C10423964**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Padwa, Jeffrey, W., Esq.**  
 Mailing Address 25 Margrave Ave  
 City Providence State RI Zip Code 02906-5617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Padwa Law, LLC Occupation Attorney  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : C10416601**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Perdikakis, Constantinos, ,**  
 Mailing Address 126 Beechwood Dr  
 City Cranston State RI Zip Code 02921-3314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Freeway Car Wash Occupation Owner  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2018  
**Transaction ID : C10423961**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 17 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Quattrocchi, Joseph, A., ,**  
Mailing Address 36 Roger Williams Dr

City Greenville State RI Zip Code 02828-2632

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

Name of Employer Douglas Oil Company Occupation Business Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423976**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Quattromani, Michael, , ,**  
Mailing Address 51 Manning St

City Providence State RI Zip Code 02906-3130

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

Name of Employer The Kraft Group Occupation Chief Financial Officer

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 03 2018

Transaction ID : **C10418493**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rubiano, Daniel, J., ,**  
Mailing Address 4 Oak Wood Cir

City Greenville State RI Zip Code 02828-1651

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

Name of Employer Rubiano and Company Occupation CPA

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423969**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 146 Carr St

City Providence State RI Zip Code 02905-1314

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

Name of Employer roger williams u Occupation artist/teacher

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2018

**Transaction ID : C10413276**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ryan, Mark, T., ,**

Mailing Address 160 Westminster St  
Moses & Afonso, Ltd.

City Providence State RI Zip Code 02903-2112

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

Name of Employer Moses & Afonso, Ltd. Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2018

**Transaction ID : C10423966**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 28 Melrose Ave

City Barrington State RI Zip Code 02806-4408

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

Name of Employer Retired Occupation Real estate

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2018

**Transaction ID : C10411684**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Savage, Jonathan, N., , Esq.**

Mailing Address 1080 Main St

City Pawtucket State RI Zip Code 02860-4847

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

Name of Employer Occupation  
Schechtman Halperin Savage Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2018

**Transaction ID : C10418492**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Singleton, James, Lynn, ,**

Mailing Address 68 Tarklin Rd

City Chepachet State RI Zip Code 02814-1513

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

Name of Employer Occupation  
Providence Performing Arts Center President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2018

**Transaction ID : C10423973**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Spero, Brian, J., , Esq.**

Mailing Address 30 Greystone Ter

City Portsmouth State RI Zip Code 02871-2501

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

Name of Employer Occupation  
The Beacon Mutual Insurance Co. President & CEO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2018

**Transaction ID : C10413280**

Amount of Each Receipt this Period  
 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Vitale, Christopher, P., ,**  
Mailing Address 10 Acacia Rd

City Bristol State RI Zip Code 02809-1367

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

Name of Employer Capitol City Group Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 19 2018

Transaction ID : **C10411851**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Walsh, Joseph, W., , Esq.**  
Mailing Address 26 Crawford Ave

City Warwick State RI Zip Code 02889-6709

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423971**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Walsh, William, G., ,**  
Mailing Address 26 Crawford Ave

City Warwick State RI Zip Code 02889

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

Name of Employer Government Strategies, Inc. Occupation Government Relations

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423968**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Wilkinson, James, D, ,**

Mailing Address 38 Wentworth Terr

City Portsmouth State RI Zip Code 02871

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423977**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 9 King Philip Rd

City Narragansett State RI Zip Code 02882-1101

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

Name of Employer Government Strategies Inc. Occupation Lobbyist

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 30 2018

Transaction ID : **C10423963**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 100 Sanctuary Dr.

City East Greenwich State RI Zip Code 02818

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 01 2018

Transaction ID : **C10427319A**

Amount of Each Receipt this Period  
10.00

Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 760.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2018  
**Transaction ID : C10427319AB**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Aleff, Hans P, , ,**  
 Mailing Address 140 Compton View Drive  
 City Middletown State RI Zip Code 02842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation none none  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 254.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018  
**Transaction ID : C10427278A**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2018  
**Transaction ID : C10427278AB**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

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

10.00

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

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

FOR LINE NUMBER: PAGE 23 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Aleff, Hans P, , ,**  
 Mailing Address 140 Compton View Drive  
 City Middletown State RI Zip Code 02842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer none Occupation none  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 254.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2018  
**Transaction ID : C10427320A**  
 Amount of Each Receipt this Period  
 16.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2018  
**Transaction ID : C10427320AB**  
 Amount of Each Receipt this Period  
 16.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Benson, Edward, , ,**  
 Mailing Address 49 Progress  
 City Pawtucket State RI Zip Code 02860  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Not employed Not employed  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 775.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2018  
**Transaction ID : C10427292A**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 24 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427292AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 77 Grosvenor Ave Apt 2

City East Providence State RI Zip Code 02914

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

Name of Employer Occupation  
Rhode Island School of Design college professor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427299A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427299AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 102	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
cicilline, john f, , ,

Mailing Address 381 atwells av

City providence State RI Zip Code 02909

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation lawyer

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2018

Transaction ID : C10427316A

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. C C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

Transaction ID : C10427316AB

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 18 Nelson Street

City Providence State RI Zip Code 02908

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Not employed

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
5300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2018

Transaction ID : C10427296A

Amount of Each Receipt this Period  
50.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2018  
**Transaction ID : C10427296AB**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Cicilline, Sabra, , ,**  
 Mailing Address 18 Nelson Street  
 City Providence State RI Zip Code 02908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Not employed Not employed  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2018  
**Transaction ID : C10427314A**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2018  
**Transaction ID : C10427314AB**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 102	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Curran, Margaret E, , ,**

Mailing Address 289 Wayland Ave

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer State of RI	Occupation Attorney
---------------------------------	------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

**Transaction ID : C10427307A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : C10427307AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Dunbar, Bartlett, S., ,**

Mailing Address 25 Bridge St

City Newport	State RI	Zip Code 02840
-----------------	-------------	-------------------

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

Name of Employer Bowen's Wharf Co	Occupation Manager/ President
--------------------------------------	----------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427300A**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	125.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 28 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2018  
**Transaction ID : C10427300AB**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Goldsmith, David, P., ,**  
 Mailing Address PO Box 1  
 City Harmony State RI Zip Code 02829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Aidance Executive  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : C10427306A**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2018  
**Transaction ID : C10427306AB**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 265 Narragansett Bay Avenue

City: Warwick State: RI Zip Code: 02889

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

Name of Employer: David Gooding Inc. Occupation: Sales

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1200.00

Date of Receipt: 10 / 31 / 2018

Transaction ID : **C10427317A**

Amount of Each Receipt this Period: 50.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Conduit total listed in Agg. field Occupation: Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1896.42

Date of Receipt: 11 / 04 / 2018

Transaction ID : **C10427317AB**

Amount of Each Receipt this Period: 50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 961 Ministerial Road

City: Wakefield State: RI Zip Code: 02879

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

Name of Employer: The Groden Center Occupation: psychologist

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 600.00

Date of Receipt: 11 / 04 / 2018

Transaction ID : **C10427324A**

Amount of Each Receipt this Period: 100.00

Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : C10427324AB**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address p.o.box365355

City boston State MA Zip Code 02136

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

Name of Employer Occupation  
self court reporter

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427302A**

Amount of Each Receipt this Period  
50.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427302AB**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Kushner, Linda, J., ,**  
Mailing Address 560 Lloyd Ave

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2018

**Transaction ID : C10427291A**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Conduit total listed in Agg. field	Occupation Conduit total listed in Agg. field
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427291AB**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Minard, Mary, Rebecca, ,**  
Mailing Address P.O. Box 235

City Westport Point	State MA	Zip Code 02791
------------------------	-------------	-------------------

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

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
775.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2018

**Transaction ID : C10427326A**

Amount of Each Receipt this Period  
75.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 32 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2018  
**Transaction ID : C10427326AB**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Parrillo, Robert, , ,**  
 Mailing Address 60 Tenth Ave.  
 City Warwick State RI Zip Code 02886  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Not employed Not employed  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2018  
**Transaction ID : C10427285A**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1896.42

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2018  
**Transaction ID : C10427285AB**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 15 Creighton St

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer Brown University	Occupation Professor
--------------------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
960.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

**Transaction ID : C10427283A**

Amount of Each Receipt this Period  
15.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

**Transaction ID : C10427283AB**

Amount of Each Receipt this Period  
15.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 15 Creighton St

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer Brown University	Occupation Professor
--------------------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
960.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2018

**Transaction ID : C10427315A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	40.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : C10427315AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 45 Hazard Ave

City Providence State RI Zip Code 02906

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

Name of Employer Occupation  
Lifespan physician

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2018

**Transaction ID : C10427295A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427295AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 102	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 533 Dudley Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer Neptune Advisors LLC	Occupation Executive
--	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10427323A**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : C10427323AB**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 90 Windward Ln

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

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

Name of Employer none	Occupation none
--------------------------	--------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2018

**Transaction ID : C10427281A**

Amount of Each Receipt this Period  
10.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	260.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 36 OF 102	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

**Transaction ID : C10427281AB**

Amount of Each Receipt this Period  
10.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 90 Windward Ln

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

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

Name of Employer none	Occupation none
--------------------------	--------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

**Transaction ID : C10427284A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

**Transaction ID : C10427284AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 102	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 90 Windward Ln

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

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

Name of Employer none	Occupation none
--------------------------	--------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2018

**Transaction ID : C10427288A**

Amount of Each Receipt this Period  
20.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1896.42

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427288AB**

Amount of Each Receipt this Period  
20.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 90 Windward Ln

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

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

Name of Employer none	Occupation none
--------------------------	--------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10427301A**

Amount of Each Receipt this Period  
50.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	70.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 102  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address PO Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1896.42

Date of Receipt: 10 / 28 / 2018

Transaction ID : **C10427301AB**

Amount of Each Receipt this Period: 50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 90 Windward Ln

City: Bristol State: RI Zip Code: 02809

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

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2320.00

Date of Receipt: 11 / 03 / 2018

Transaction ID : **C10427322A**

Amount of Each Receipt this Period: 100.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1896.42

Date of Receipt: 11 / 04 / 2018

Transaction ID : **C10427322AB**

Amount of Each Receipt this Period: 100.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	24498.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 SOUTH PROSPECT AVE  
C/O FINANCE DEPARTMENT

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

Transaction ID : C10418496

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
American Optometric Association

Mailing Address 1505 Prince St  
Ste 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

Transaction ID : C10418488

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ROAD & TRANSPORTATION BUILDERS ASSOCIATION PAC

Mailing Address 250 E STREET, SW  
SUITE 900

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00118208

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

Transaction ID : C10418487

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**BEND THE ARC JEWISH ACTION, INC. PAC**

Mailing Address 1825 K STREET NW  
STE. 210

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00573253

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1852.24

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2018

**Transaction ID : C10423998**

Amount of Each Receipt this Period  
52.24

Memo Item

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

Mailing Address 840 FIRST STREET, NE  
SUITE 400

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00674093

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10418498**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Build PAC National Association of Home Builders**

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10418489**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3552.24
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Dominick Ruggerio**

Mailing Address 42 Countryside Dr

City Providence State RI Zip Code 02904

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : C10423974**

Amount of Each Receipt this Period  
500.00

Memo Item

Comprised of Federally Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**Human Rights Campaign PAC**

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10418497**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM**

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10418494**

Amount of Each Receipt this Period  
4000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers**

Mailing Address 1101 King St  
Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2018

**Transaction ID : C10418490**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL MARINE MANUFACTURERS ASSOCIATION'S BOAT PAC**

Mailing Address 650 MASSACHUSETTS AVE, NW  
SUITE 520

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : C10423980**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION C**

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036-1222

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2018

**Transaction ID : C10412313**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 43 OF 102	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Sierra Club Political Committee**

Mailing Address **85 SECOND STREET 2ND FLR.**

City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94105</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00135368**

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2018

**Transaction ID : C10418495**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="20552.24"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 102
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CICILLINE VICTORY FUND**

Mailing Address ONE PARK ROW, 5TH FLOOR

City PROVIDENCE	State RI	Zip Code 02903
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00656611

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20951.82

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2018

**Transaction ID : C10424005**

Amount of Each Receipt this Period  
 3172.97

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Agniel, Kristi, M., ,**

Mailing Address 375 Lloyd Ave  
Apt 2C

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer Agniel Commodities LLC	Occupation human resources admin
--	-------------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2018

**Transaction ID : C10424006**

Amount of Each Receipt this Period  
 500.00

Memo Item

\*

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

Mailing Address 196 Blackstone Blvd

City Providence	State RI	Zip Code 02906-5700
--------------------	-------------	------------------------

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

Name of Employer Reach Out and Read RI	Occupation ED
---	------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2018

**Transaction ID : C10424010**

Amount of Each Receipt this Period  
 250.00

Memo Item

\*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3172.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 102
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 14 Kingston Ave

City Providence	State RI	Zip Code 02906-3314
--------------------	-------------	------------------------

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

Name of Employer Brown University	Occupation Teacher, Writer
--------------------------------------	-------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2018

**Transaction ID : C10424014**

Amount of Each Receipt this Period  
500.00

Memo Item

\*

**B.** Full Name (Last, First, Middle Initial)  
**Esserman, Dean, M., ,**

Mailing Address 100 Wayland Ave  
Apt 11

City Providence	State RI	Zip Code 02906-4216
--------------------	-------------	------------------------

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

Name of Employer New Haven Police Department	Occupation Chief Of Police
---	-------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2018

**Transaction ID : C10424008**

Amount of Each Receipt this Period  
100.00

Memo Item

\*

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

Mailing Address 50 Stimson Ave

City Providence	State RI	Zip Code 02906-3206
--------------------	-------------	------------------------

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

Name of Employer self	Occupation artist
--------------------------	----------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2018

**Transaction ID : C10424013**

Amount of Each Receipt this Period  
1000.00

Memo Item

\*

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 102
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Tate, Deborah, M., ,**

Mailing Address 321 S Main St  
Ste 400

City Providence State RI Zip Code 02903-7109

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

Name of Employer Occupation  
McIntyre, Tate Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2018

Transaction ID : **C10424007**

Amount of Each Receipt this Period  
500.00

Memo Item

\*

**B.** Full Name (Last, First, Middle Initial)  
**Tobak, E. Jill, , ,**

Mailing Address 40 Brenton Ave

City Providence State RI Zip Code 02906-2415

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

Name of Employer Occupation  
Fox Tag and Label Sales

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2018

Transaction ID : **C10424011**

Amount of Each Receipt this Period  
200.00

Memo Item

\*

**C.** Full Name (Last, First, Middle Initial)  
**CICILLINE VICTORY FUND - Unitemized**

Mailing Address ONE PARK ROW, 5TH FLOOR

City PROVIDENCE State RI Zip Code 02903

FEC ID number of contributing federal political committee. **C** C00656611

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2018

Transaction ID : **CZ10424005**

Amount of Each Receipt this Period  
200.00

Memo Item

\*

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 102
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CICILLINE VICTORY FUND**

Mailing Address ONE PARK ROW, 5TH FLOOR

City PROVIDENCE	State RI	Zip Code 02903
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00656611

Name of Employer	Occupation

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20951.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : C10424015**

Amount of Each Receipt this Period  
264.11

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Abrams, Joan, C., ,**

Mailing Address P.O. Box 899

City Bristol	State RI	Zip Code 02809-0998
-----------------	-------------	------------------------

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

Name of Employer Simmons College	Occupation Professor
-------------------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2018

**Transaction ID : C10424025**

Amount of Each Receipt this Period  
250.00

Memo Item

\*

**C.** Full Name (Last, First, Middle Initial)  
**Goodman, Doree, M., ,**

Mailing Address 39 Bagy Wrinkle Cv

City Warren	State RI	Zip Code 02885-4114
----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : C10424018**

Amount of Each Receipt this Period  
50.00

Memo Item

\*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	264.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 102
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

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

Mailing Address 45 Whitaker Ave

City East Providence	State RI	Zip Code 02916
-------------------------	-------------	-------------------

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

Name of Employer City of Providence	Occupation Senior compliance officer
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : C10424016**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CICILLINE VICTORY FUND - Unitemized**

Mailing Address ONE PARK ROW, 5TH FLOOR

City PROVIDENCE	State RI	Zip Code 02903
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FEC ID number of contributing federal political committee. **C** C00656611

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
175.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2018

**Transaction ID : CZ10424015**

Amount of Each Receipt this Period  
175.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CICILLINE VICTORY FUND**

Mailing Address ONE PARK ROW, 5TH FLOOR

City PROVIDENCE	State RI	Zip Code 02903
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FEC ID number of contributing federal political committee. **C** C00656611

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20951.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2018

**Transaction ID : C10424024**

Amount of Each Receipt this Period  
288.14

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	288.14
<b>TOTAL</b> This Period (last page this line number only).....▶	3725.22



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

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

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

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A.** Full Name (Last, First, Middle Initial)  
**COLIN ALLRED FOR CONGRESS**

Mailing Address PO BOX 601631

City: DALLAS State: TX Zip Code: 75360

FEC ID number of contributing federal political committee: **C** C00637868

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2018

**Transaction ID : C10424000**

Amount of Each Receipt this Period  
 4000.00

Memo Item

Refund of Contribution

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

Mailing Address

City: State: Zip Code:

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City: State: Zip Code:

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 102			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Abigail Reyes</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018
Mailing Address		FEC Identification Number C
City Central Falls	State RI	Zip Code 02863
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 592.69
Candidate Name	Category/Type	Transaction ID : D551429
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 106.09
Candidate Name	Category/Type	Transaction ID : D551485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 26.09
Candidate Name	Category/Type	Transaction ID : D551486
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	724.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 34.47
Candidate Name		Transaction ID : D551487
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 7.18
Candidate Name		Transaction ID : D551488
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adriana Carlucci</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018
Mailing Address 10 Sorrell Rd		FEC Identification Number C
City North Providence	State RI	Zip Code 02904
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 127.34
Candidate Name		Transaction ID : D551430
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	168.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Andujar, Andy, , Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2018	
Mailing Address 174 Harold St			FEC Identification Number C	
City Providence	State RI	Zip Code 02908-4714	Amount of Each Disbursement this Period 620.00	
Purpose of Disbursement Reimbursement		Category/ Type	Transaction ID : D551382	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Arias, Michelle, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period 1347.68	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551428	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Augustus Seabrooke</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018	
Mailing Address 9 Pitman St			FEC Identification Number C	
City Providence	State RI	Zip Code 02906	Amount of Each Disbursement this Period 312.12	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551433	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2279.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Ballyhoo Enterprises, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2018		
Mailing Address PO Box 7842			FEC Identification Number C		
City Cumberland	State RI	Zip Code 02864	Amount of Each Disbursement this Period 1933.35		
Purpose of Disbursement Printing (Field)		Category/ Type	Transaction ID : D551448		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2018		
Mailing Address P.O. Box 15019			FEC Identification Number C		
City Wilmington	State DE	Zip Code 19850	Amount of Each Disbursement this Period 1226.75		
Purpose of Disbursement Credit Card		Category/ Type	Transaction ID : D551434		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Bay Business Machines, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2018		
Mailing Address 44 Albion Rd, Suite 103B			FEC Identification Number C		
City Lincoln	State RI	Zip Code 02865	Amount of Each Disbursement this Period 1114.24		
Purpose of Disbursement Office Equipment		Category/ Type	Transaction ID : D551411		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4274.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Benitez, Emelda, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018	
Mailing Address 61 Georgia Ave.			FEC Identification Number C	
City Providence	State RI	Zip Code 02905	Amount of Each Disbursement this Period 653.23	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551401	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Benjamin Smith</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018	
Mailing Address 200 Jewett St			FEC Identification Number C	
City Providence	State RI	Zip Code 02908	Amount of Each Disbursement this Period 781.44	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551435	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Brian Injury Association of Rhode Island</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2018	
Mailing Address 1017 Waterman Ave			FEC Identification Number C	
City East Providence	State RI	Zip Code 02914	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : D551450	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1934.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Capriccio</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2018		
Mailing Address 2 Pine St			FEC Identification Number C		
City Providence	State RI	Zip Code 02903-2813	Amount of Each Disbursement this Period 2710.45		
Purpose of Disbursement Catering (Fundraising)		Category/ Type	Transaction ID : D551387		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CFO Compliance</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address One Park Row, 5th Floor			FEC Identification Number C		
City Providence	State RI	Zip Code 02903	Amount of Each Disbursement this Period 1509.00		
Purpose of Disbursement Compliance Consulting		Category/ Type	Transaction ID : D551404		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Christopher Bizzacco</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018		
Mailing Address 83 Readville St			FEC Identification Number C		
City Boston	State MA	Zip Code 02136	Amount of Each Disbursement this Period 10000.00		
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551437		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14219.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Cicilline-DiMezza, Roberta, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2018	
Mailing Address 119 High Street			FEC Identification Number C	
City Bristol	State RI	Zip Code 02809	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551405	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Cicilline-DiMezza, Roberta, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2018	
Mailing Address 119 High Street			FEC Identification Number C	
City Bristol	State RI	Zip Code 02809	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D551406	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Citi Cards</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2018	
Mailing Address PO Box 9001037			FEC Identification Number C	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 115.29	
Purpose of Disbursement Credit Card		Category/ Type	Transaction ID : D551422	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1415.29
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial)  
**A. City of Central Falls Parks & Rec Dept.**

Mailing Address 580 Broad Street

City Central Falls State RI Zip Code 02863

Purpose of Disbursement Contributions

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : D551420

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Community Care Alliance**

Mailing Address P.O Box 1700

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 575.00

Transaction ID : D551408

Memo Item

Full Name (Last, First, Middle Initial)  
**c. Community Care Alliance**

Mailing Address P.O Box 1700

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 575.00

Transaction ID : D551409

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Downtown Woonsocket Collaborative</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2018		
Mailing Address P.O. Box 91,			FEC Identification Number C		
City Woonsocket	State RI	Zip Code 02895	Amount of Each Disbursement this Period 600.00		
Purpose of Disbursement Contributions		Category/ Type	Transaction ID : D551453		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. First Bank Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018		
Mailing Address 5565 Glenridge Connector NE			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30342	Amount of Each Disbursement this Period 520.46		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D551390		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. First Bank Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018		
Mailing Address 5565 Glenridge Connector NE			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30342	Amount of Each Disbursement this Period 396.04		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D551391		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1516.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018
Mailing Address 5565 Glenridge Connector NE		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 41.10
Candidate Name		Transaction ID : D551392
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gabarra, Amy, , Ms.,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2018
Mailing Address 3 Ellis Street		FEC Identification Number C
City Barrington	State RI	Zip Code 02806
Purpose of Disbursement Reimbursement		Amount of Each Disbursement this Period 38.50
Candidate Name		Transaction ID : D551380
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gabarra, Amy, , Ms.,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 3 Ellis Street		FEC Identification Number C
City Barrington	State RI	Zip Code 02806
Purpose of Disbursement FUNDRAISING		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : D551381
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3579.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. GM Financial**

Full Name (Last, First, Middle Initial)  
Mailing Address 801 Cherry Street, Ste. 3500

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement Auto Lease

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 311.80

Transaction ID : D551423

Memo Item

**B. Good Neighbors, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 55 Turner Ave

City Riverside State RI Zip Code 02915

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : D551460

Memo Item

**C. IBEW Local 2323**

Full Name (Last, First, Middle Initial)  
Mailing Address 22 Amflex Dr

City Cranston State RI Zip Code 02920

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : D551461

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 811.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Juniper Styles</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018
Mailing Address 9 Pitman St		FEC Identification Number C
City Providence	State RI	Zip Code 02906
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 214.00
Candidate Name	Category/ Type	Transaction ID : D551439
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2018
Mailing Address 68 Colwell Street, #1		FEC Identification Number C
City Cranston	State RI	Zip Code 02920
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	Transaction ID : D551416
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Luchette, Richard</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018
Mailing Address 432 Williams St.		FEC Identification Number C
City Providence	State RI	Zip Code 02906
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 209.17
Candidate Name	Category/ Type	Transaction ID : D551471
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	673.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Nationwide Insurance</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2018	
Mailing Address PO Box 742522			FEC Identification Number C	
City Cincinnati	State OH	Zip Code 45274	Amount of Each Disbursement this Period 283.44	
Purpose of Disbursement INSURANCE		Category/ Type	Transaction ID : D551418	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. New Blue Interactive, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018	
Mailing Address 1146 19th St NW, Ste 750			FEC Identification Number C	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Fundraising Consulting (Online)		Category/ Type	Transaction ID : D551413	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. New Blue Interactive, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018	
Mailing Address 1146 19th St NW, Ste 750			FEC Identification Number C	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 2.50	
Purpose of Disbursement Fundraising Consulting (Online)		Category/ Type	Transaction ID : D551414	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2785.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2018
Mailing Address 1101 15th St, NW Suite 500		FEC Identification Number C
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Database		Amount of Each Disbursement this Period 3450.00
Candidate Name	Category/ Type	Transaction ID : D551399
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pawtucket Hall of Fame</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2018
Mailing Address 137 Roosevelt Ave		FEC Identification Number C
City Pawtucket	State RI	Zip Code 02860
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	Transaction ID : D551417
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 501 Wampanoag Trail		FEC Identification Number C
City Riverside	State RI	Zip Code 02915
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 4392.92
Candidate Name	Category/ Type	Transaction ID : D551394
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8092.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 501 Wampanoag Trail			FEC Identification Number C		
City Riverside	State RI	Zip Code 02915	Amount of Each Disbursement this Period 1610.15		
Purpose of Disbursement Payroll Tax		Category/Type	Transaction ID : D551395		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2018		
Mailing Address 501 Wampanoag Trail			FEC Identification Number C		
City Riverside	State RI	Zip Code 02915	Amount of Each Disbursement this Period 165.49		
Purpose of Disbursement Payroll Service Fee		Category/Type	Transaction ID : D551396		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2018		
Mailing Address 501 Wampanoag Trail			FEC Identification Number C		
City Riverside	State RI	Zip Code 02915	Amount of Each Disbursement this Period 8451.61		
Purpose of Disbursement Payroll Service Fee		Category/Type	Transaction ID : D551397		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10227.25
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trail

City Riverside State RI Zip Code 02915

Purpose of Disbursement Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 107.93

Transaction ID : D551398

Memo Item

**B. Pease, Annie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 17 Whiting St

City Providence State RI Zip Code 02906-2635

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 5000.00

Transaction ID : D551415

Memo Item

**c. Regine Printing**

Full Name (Last, First, Middle Initial)

Mailing Address 208 Laurel Hill Ave

City Providence State RI Zip Code 02909-4517

Purpose of Disbursement Printing (Fundraising)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 271.78

Transaction ID : D551388

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 5379.71

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Rising Tide Interactive</b>		Date of Disbursement
Mailing Address 1250 H Street NW		M M / D D / Y Y Y Y 11 / 05 / 2018
City Washington	State DC	Zip Code 20005
Purpose of Disbursement MEDIA / ADVERTISING		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 5500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551424
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Rising Tide Interactive</b>		Date of Disbursement
Mailing Address 1250 H Street NW		M M / D D / Y Y Y Y 11 / 13 / 2018
City Washington	State DC	Zip Code 20005
Purpose of Disbursement MEDIA / ADVERTISING		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 5500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551425
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Rising Tide Interactive</b>		Date of Disbursement
Mailing Address 1250 H Street NW		M M / D D / Y Y Y Y 11 / 13 / 2018
City Washington	State DC	Zip Code 20005
Purpose of Disbursement MEDIA / ADVERTISING		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 5500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551426
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	16500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Rising Tide Interactive</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 1250 H Street NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005
Purpose of Disbursement MEDIA / ADVERTISING		Amount of Each Disbursement this Period 750.00
Candidate Name		Transaction ID : D551427
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rolla Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 1132 6th Street, NW #2		FEC Identification Number C
City Washington	State DC	Zip Code 20001-1639
Purpose of Disbursement Fundraising Consulting		Amount of Each Disbursement this Period 4500.00
Candidate Name		Transaction ID : D551384
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Senior Digest, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2018
Mailing Address 21 Industrial Court		FEC Identification Number C
City Seekonk	State MA	Zip Code 02771
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : D551481
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Cicilline Committee**

**A. The Times**

Full Name (Last, First, Middle Initial)  
Mailing Address 23 Exchange St

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1697.00

Transaction ID : D551419

Memo Item

**B. Verizon**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement Mobile Phone

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 201.92

Transaction ID : D551385

Memo Item

**C. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address 2965 W Corporate Lakes Blvd

City Weston State FL Zip Code 33331-3626

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 20780.48

Transaction ID : D550574

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 22679.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 14 Arrow St			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02138-5106	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Credit Card Processing fee		Category/ Type	Transaction ID : D550620	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 4333 Amon Carter Boulevard			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155	Amount of Each Disbursement this Period 23.38	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550617	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 4333 Amon Carter Boulevard			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155	Amount of Each Disbursement this Period 477.20	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550618	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 477.20
Candidate Name		Transaction ID : D550607
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 299.20
Candidate Name		Transaction ID : D550608
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 477.20
Candidate Name		Transaction ID : D550609
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 206.20
Candidate Name	Category/ Type	Transaction ID : D550610
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 21.25
Candidate Name	Category/ Type	Transaction ID : D550611
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 314.20
Candidate Name	Category/ Type	Transaction ID : D550598
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 477.20
Candidate Name	Category/ Type	Transaction ID : D550599
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 610.01
Candidate Name	Category/ Type	Transaction ID : D550600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 314.20
Candidate Name	Category/ Type	Transaction ID : D550601
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 66.46
Candidate Name	Category/ Type	Transaction ID : D550603
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 299.20
Candidate Name	Category/ Type	Transaction ID : D550604
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 21.25
Candidate Name	Category/ Type	Transaction ID : D550605
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 589.30
Candidate Name	Category/ Type	Transaction ID : D550658
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 18.14
Candidate Name	Category/ Type	Transaction ID : D550659
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 459.20
Candidate Name	Category/ Type	Transaction ID : D550660
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 469.30
Candidate Name	Category/Type	Transaction ID : D550661
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 450.30
Candidate Name	Category/Type	Transaction ID : D550662
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4214
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 391.00
Candidate Name	Category/Type	Transaction ID : D550588
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Cicilline Committee**

**A. Amtrak**

Full Name (Last, First, Middle Initial)  
Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 345.00

Transaction ID : D550613

Memo Item

**B. AT&T Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 30 E St SW

City Washington State DC Zip Code 20024-3224

Purpose of Disbursement Mobile Phones

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 138.76

Transaction ID : D550614

Memo Item

**c. AT&T Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 30 E St SW

City Washington State DC Zip Code 20024-3224

Purpose of Disbursement Mobile Phones

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 63.24

Transaction ID : D550595

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Bistro Cacao</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 320 Massachusetts Ave NE			FEC Identification Number C		
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1040.00		
Purpose of Disbursement Event Expense		Category/ Type	Transaction ID : D550577		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320-6001	Amount of Each Disbursement this Period 442.20		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550615		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320-6001	Amount of Each Disbursement this Period 442.20		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550616		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO Box 20706			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30320-6001	Amount of Each Disbursement this Period 867.20	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550627	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO Box 20706			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30320-6001	Amount of Each Disbursement this Period 867.20	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550628	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Hostway.com</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 100 N Riverside Plz Ste 800			FEC Identification Number C	
City Chicago	State IL	Zip Code 60606-1564	Amount of Each Disbursement this Period 36.95	
Purpose of Disbursement Web Hosting		Category/ Type	Transaction ID : D550625	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. House Members Dining Room</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address Capitol Hill H-118			FEC Identification Number C	
City Washington	State DC	Zip Code 20543	Amount of Each Disbursement this Period 128.60	
Purpose of Disbursement Food and Beverage		Category/ Type	Transaction ID : D550584	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Hub-Federal Signs</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO Box 1			FEC Identification Number C	
City Providence	State RI	Zip Code 02901-0001	Amount of Each Disbursement this Period 347.75	
Purpose of Disbursement Sings		Category/ Type	Transaction ID : D550576	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Hyatt Place Tempe Phoenix</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 1413 W Rio Salado Pkwy			FEC Identification Number C	
City Tempe	State AZ	Zip Code 85281	Amount of Each Disbursement this Period 243.28	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : D550646	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Place Tempe Phoenix</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 1413 W Rio Salado Pkwy			FEC Identification Number C		
City Tempe	State AZ	Zip Code 85281	Amount of Each Disbursement this Period 233.11		
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : D550647		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Hyatt Regency Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 1 Ave de Lafayette			FEC Identification Number C		
City Boston	State MA	Zip Code 02111	Amount of Each Disbursement this Period 338.13		
Purpose of Disbursement lodging		Category/ Type	Transaction ID : D550575		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Hyatt Regency Minneapolis</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address			FEC Identification Number C		
City Minneapolis	State MN	Zip Code	Amount of Each Disbursement this Period 156.22		
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : D550642		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Regency Minneapolis</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address		FEC Identification Number C
City Minneapolis	State MN	Zip Code
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 156.22
Candidate Name		Transaction ID : D550643
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hyatt Regency</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 9801 International Dr		FEC Identification Number C
City Orlando	State FL	Zip Code 32819
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 265.86
Candidate Name		Transaction ID : D550639
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hyatt Regency</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 9801 International Dr		FEC Identification Number C
City Orlando	State FL	Zip Code 32819
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 65.86
Candidate Name		Transaction ID : D550640
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. JetBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 118-29 Queens Boulevard		FEC Identification Number C
City Forest Hills	State NY	Zip Code 11375
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 52.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550624 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JetBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 118-29 Queens Boulevard		FEC Identification Number C
City Forest Hills	State NY	Zip Code 11375
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 50.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550606 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. JetBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 118-29 Queens Boulevard		FEC Identification Number C
City Forest Hills	State NY	Zip Code 11375
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 375.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550612 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. Lyft Ride**

Full Name (Last, First, Middle Initial)  
Mailing Address 31-00 47th Ave

City Long Island State NY Zip Code 11101

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 5.89

Transaction ID : D550594

Memo Item

**B. Lyft Ride**

Full Name (Last, First, Middle Initial)  
Mailing Address 31-00 47th Ave

City Long Island State NY Zip Code 11101

Purpose of Disbursement travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 40.64

Transaction ID : D550622

Memo Item

**c. Lyft Ride**

Full Name (Last, First, Middle Initial)  
Mailing Address 31-00 47th Ave

City Long Island State NY Zip Code 11101

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 19.01

Transaction ID : D550585

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 8.33		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550580		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 1.27		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550581		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 9.78		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550663		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 10.20		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550653		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 10.22		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550654		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Lyft Ride</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 31-00 47th Ave			FEC Identification Number C		
City Long Island	State NY	Zip Code 11101	Amount of Each Disbursement this Period 10.66		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D550635		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. Lyft Ride**

Full Name (Last, First, Middle Initial)  
Mailing Address 31-00 47th Ave

City Long Island State NY Zip Code 11101

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 7.62

Transaction ID : D550657

Memo Item

**B. Metro PCS**

Full Name (Last, First, Middle Initial)  
Mailing Address 112 Douglas Ave

City Providence State RI Zip Code 02908-3257

Purpose of Disbursement Mobile Phones

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 755.00

Transaction ID : D550587

Memo Item

**c. NYC Taxi - Yellow Cab**

Full Name (Last, First, Middle Initial)  
Mailing Address 287 10th Ave

City New York State NY Zip Code 10001-7003

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 23.16

Transaction ID : D550589

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Omni Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 1 W Exchange St			FEC Identification Number C		
City Providence	State RI	Zip Code 02903	Amount of Each Disbursement this Period 1057.15		
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : D550578		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Providence Journal</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 75 Fountain Street			FEC Identification Number C		
City Providence	State RI	Zip Code 02902	Amount of Each Disbursement this Period 475.85		
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : D550648		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Providence Journal</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 75 Fountain Street			FEC Identification Number C		
City Providence	State RI	Zip Code 02902	Amount of Each Disbursement this Period 475.85		
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : D550649		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Providence Journal</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 75 Fountain Street			FEC Identification Number C		
City Providence	State RI	Zip Code 02902	Amount of Each Disbursement this Period 475.85		
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : D550652		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Shell Oil Newport</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 136 Connell Hwy			FEC Identification Number C		
City Newport	State RI	Zip Code 02840	Amount of Each Disbursement this Period 10.04		
Purpose of Disbursement Gasoline		Category/ Type	Transaction ID : D550630		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Shell Oil Newport</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 136 Connell Hwy			FEC Identification Number C		
City Newport	State RI	Zip Code 02840	Amount of Each Disbursement this Period 21.34		
Purpose of Disbursement Gasoline		Category/ Type	Transaction ID : D550655		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 1 Aviation Cir		FEC Identification Number C
City Washington	State DC	Zip Code 20001-6000
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 45.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550623 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Valley Breeze</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 6 Blackstone Valley Pl # 204		FEC Identification Number C
City Lincoln	State RI	Zip Code 02865
Purpose of Disbursement Advertisement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1817.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550626 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tony's Colonial Food</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 311 Atwells Ave		FEC Identification Number C
City Providence	State RI	Zip Code 02903
Purpose of Disbursement Food and Beverage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 99.81	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D550579 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. Woonsocket Call**

Full Name (Last, First, Middle Initial)  
Mailing Address 75 Main St

City Woonsocket State RI Zip Code 02895-4312

Purpose of Disbursement Advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 200.00

Transaction ID : D550631

Memo Item

**B. Woonsocket Call**

Full Name (Last, First, Middle Initial)  
Mailing Address 75 Main St

City Woonsocket State RI Zip Code 02895-4312

Purpose of Disbursement Advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 598.50

Transaction ID : D550632

Memo Item

**c. Woonsocket Call**

Full Name (Last, First, Middle Initial)  
Mailing Address 75 Main St

City Woonsocket State RI Zip Code 02895-4312

Purpose of Disbursement Advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 300.00

Transaction ID : D550633

Memo Item

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Woonsocket Call</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018		
Mailing Address 75 Main St			FEC Identification Number C		
City Woonsocket	State RI	Zip Code 02895-4312	Amount of Each Disbursement this Period 598.50		
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : D550634		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	104263.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. Radio Voz do Emigrante</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address P.O. Box 9813		FEC Identification Number C
City Fall River	State MA	Zip Code 02720
Purpose of Disbursement Radio Buy	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 600.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551478
State: District:	<input type="checkbox"/> Memo Item	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

**A. Democratic Congressional Campaign Cmte**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer to National Party Committee

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2018

FEC Identification Number: C C00000935

Amount of Each Disbursement this Period: 50000.00

Transaction ID : D551386

Memo Item

**B. NATE MCMURRAY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 161

City LEWISTON State NY Zip Code 14092

Purpose of Disbursement Contributions

Candidate Name MCMURRAY, NATHAN DOUGLAS, , ,

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District: 27

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C C00666453

Amount of Each Disbursement this Period: 2000.00

Transaction ID : D551476

Memo Item

**c. Rhode Island Democratic Party**

Full Name (Last, First, Middle Initial)  
Mailing Address 249 Roosevelt Ave

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement Contributions

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 4375.00

Transaction ID : D551407

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 56375.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 2965 W Corporate Lakes Blvd		FEC Identification Number C
City Weston	State FL	Zip Code 33331-3626
Purpose of Disbursement Credit Card	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 46000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551383
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SODERBERG FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 1171		FEC Identification Number C C00649798
City DAYTONA BEACH	State FL	Zip Code 32115
Purpose of Disbursement Contribution	Category/ Type	
Candidate Name <b>SODERBERG, NANCY, , ,</b>	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551489
State: FL District: 06	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EASTMAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 4808 DAVENPORT STREET		FEC Identification Number C C00639310
City OMAHA	State NE	Zip Code 68132
Purpose of Disbursement Contribution	Category/ Type	
Candidate Name <b>EASTMAN, KARA, , ,</b>	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D551490
State: NE District: 02	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	46000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DANA BALTER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address 2200 S. SALINA ST. #701			FEC Identification Number <b>C</b> C00655183	
City SYRACUSE	State NY	Zip Code 13205	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : <b>D551492</b>	
Candidate Name <b>BALTER, DANA, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 24	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. ELAINE FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 66191			FEC Identification Number <b>C</b> C00664375	
City VIRGINIA BEACH	State VA	Zip Code 23466	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : <b>D551495</b>	
Candidate Name <b>LURIA, ELAINE, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: VA District: 02	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. DEAN PHILLIPS FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 741			FEC Identification Number <b>C</b> C00640714	
City EXCELSIOR	State MN	Zip Code 55331	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : <b>D551496</b>	
Candidate Name <b>PHILLIPS, DEAN, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MN District: 03	<input checked="" type="checkbox"/> Memo Item			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. CINDY AXNE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 3775 EP TRUE PARKWAY P.O. BOX 126		FEC Identification Number <b>C</b> C00646844
City WEST DES MOINES	State IA	Zip Code 50265
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>AXNE, CINDY, , ,</b>	Category/ Type	Transaction ID : <b>D551498</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: IA District: 03		

Full Name (Last, First, Middle Initial) <b>B. SPANBERGER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 3121		FEC Identification Number <b>C</b> C00649913
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>SPANBERGER, ABIGAIL, , ,</b>	Category/ Type	Transaction ID : <b>D551500</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: VA District: 07		

Full Name (Last, First, Middle Initial) <b>C. BRINDISI FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 165		FEC Identification Number <b>C</b> C00648725
City UTICA	State NY	Zip Code 13503
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BRINDISI, ANTHONY, , ,</b>	Category/ Type	Transaction ID : <b>D551511</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: NY District: 22		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. O'CONNOR FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 10292			FEC Identification Number <b>C</b> C00667964	
City COLUMBUS	State OH	Zip Code 43201	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution			Transaction ID : D551512	
Candidate Name <b>O'CONNOR, DANIEL JAY, , ,</b>			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: OH District: 12				

Full Name (Last, First, Middle Initial) <b>B. AMMAR CAMPA FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address P.O. BOX 610, 13961 CAMPO RD.			FEC Identification Number <b>C</b> C00635888	
City JAMUL	State CA	Zip Code 91935	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution			Transaction ID : D551513	
Candidate Name <b>CAMPA-NAJJAR, AMMAR, , ,</b>			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 50				

Full Name (Last, First, Middle Initial) <b>C. ELISSA SLOTKIN FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 244			FEC Identification Number <b>C</b> C00650150	
City HOLLY	State MI	Zip Code 48442	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution			Transaction ID : D551502	
Candidate Name <b>SLOTKIN, ELISSA, , ,</b>			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MI District: 08				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. MJ FOR TEXAS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 8108		FEC Identification Number C 00649350
City ROUND ROCK	State TX	Zip Code 78683
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>HEGAR, MARY JENNINGS MJ, , ,</b>		Transaction ID : D551503
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: TX District: 31		

Full Name (Last, First, Middle Initial) <b>B. FINKENAUER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address P.O. BOX 598		FEC Identification Number C 00637074
City DUBUQUE	State IA	Zip Code 52004
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>FINKENAUER, ABBY, , ,</b>		Transaction ID : D551504
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: IA District: 01		

Full Name (Last, First, Middle Initial) <b>C. TJ COX FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 804		FEC Identification Number C 00648956
City SELMA	State CA	Zip Code 93662
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>COX, TERRANCE JOHN (TJ), , ,</b>		Transaction ID : D551505
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: CA District: 21		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. CORT VANOSTRAN FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 16041			FEC Identification Number C 006650440	
City CLAYTON	State MO	Zip Code 63105	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D551506	
Candidate Name VANOSTRAN, CORT, , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: MO	District: 02			

Full Name (Last, First, Middle Initial) <b>B. MCCREADY FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 78855			FEC Identification Number C 00641381	
City CHARLOTTE	State NC	Zip Code 28277	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D551507	
Candidate Name MCCREADY, DANIEL, , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: NC	District: 09			

Full Name (Last, First, Middle Initial) <b>C. TOM MALINOWSKI FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 58			FEC Identification Number C 00656686	
City MARTINSVILLE	State NJ	Zip Code 08836	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contributions		Category/ Type	Transaction ID : D551508	
Candidate Name MALINOWSKI, TOM, , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: NJ	District: 07			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. JOSH WELLE FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 8801			FEC Identification Number C 00658336	
City RED BANK	State NJ	Zip Code 07701	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D551509	
Candidate Name WELLE, JOSH, , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: NJ	District: 04			

Full Name (Last, First, Middle Initial) <b>B. ANDY KIM FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 211			FEC Identification Number C 00648220	
City MARLTON	State NJ	Zip Code 08053	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D551499	
Candidate Name KIM, ANDY, , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: NJ	District: 03			

Full Name (Last, First, Middle Initial) <b>C. ELECT CAROLYN LONG</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018	
Mailing Address PO BOX 821288			FEC Identification Number C 00660472	
City VANCOUVER	State WA	Zip Code 98682	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D551514	
Candidate Name LONG, CAROLYN N., , ,		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: WA	District: 03			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. CLARKE TUCKER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address P.O. BOX 7268		FEC Identification Number C 00671156
City LITTLE ROCK	State AR	Zip Code 72217
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>TUCKER, EVERETT CLARKE IV, , ,</b>	Category/ Type	Transaction ID : <b>D551501</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: AR District: 02		

Full Name (Last, First, Middle Initial) <b>B. JESSICA MORSE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address 1079 SUNRISE AVE SUITE B275		FEC Identification Number C 00650408
City ROSEVILLE	State CA	Zip Code 95661
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>MORSE, JESSICA, , ,</b>	Category/ Type	Transaction ID : <b>D551510</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: CA District: 04		

Full Name (Last, First, Middle Initial) <b>C. KIRKPATRICK FOR ARIZONA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO BOX 12011		FEC Identification Number C 00437293
City CASA GRANDE	State AZ	Zip Code 85130
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>KIRKPATRICK, ANN, , ,</b>	Category/ Type	Transaction ID : <b>D551497</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: AZ District: 01		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 102	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cicilline Committee**

Full Name (Last, First, Middle Initial) <b>A. LISA BROWN FOR CONGRESS</b>			Date of Disbursement
Mailing Address PO BOX 154			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City SPOKANE	State WA	Zip Code 99210	FEC Identification Number
Purpose of Disbursement Contribution		<input type="text"/>	<input type="text" value="C"/> C00654400
Candidate Name <b>BROWN, LISA, , ,</b>		Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="2000.00"/>
State: WA District: 05			Transaction ID : D551491 <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. PAUL DAVIS FOR KANSAS</b>			Date of Disbursement
Mailing Address PO BOX 944			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City LAWRENCE	State KS	Zip Code 66044	FEC Identification Number
Purpose of Disbursement Contributions		<input type="text"/>	<input type="text" value="C"/> C00653121
Candidate Name <b>DAVIS, PAUL T., , ,</b>		Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="2000.00"/>
State: KS District: 02			Transaction ID : D551493 <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. SCANLON FOR CONGRESS</b>			Date of Disbursement
Mailing Address PO BOX 263			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City SWARTHMORE	State PA	Zip Code 19081	FEC Identification Number
Purpose of Disbursement Contribution		<input type="text"/>	<input type="text" value="C"/> C00669358
Candidate Name <b>SCANLON, MARY GAY, , ,</b>		Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>
State: PA District: 05			Transaction ID : D551494 <input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="102375.00"/>