

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC ELECTORS

2014 OCT 15 AM 10:57 14 OCT 16 PM 4:00

Office Use Only FEDERAL MAIL CENTER 12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

Zaccaria for Senate

ADDRESS (number and street) PO Box 1302

Check if different than previously reported. (ACC) North Kingstown RI 02852

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT

C C00565671

3. IS THIS REPORT NEW (N) OR AMENDED (A)

RI 02

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), Termination Report (TER)

- (b) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). Election on MM/DD/YYYY in the State of

- (c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S). Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 08/21/2014 through 09/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bernadette B Dion

Signature of Treasurer Bernadette B Dion Date 10/11/2014

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

Table with 10 columns and 1 row, labeled 'Office Use Only'.

14020960784

**SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 15

Write or Type Committee Name  
**Zaccaria for Senate**

Report Covering the Period: From: 

M	M
08	

 / 

D	D
21	

 / 

Y	Y	Y	Y
2014			

 To: 

M	M
09	

 / 

D	D
30	

 / 

Y	Y	Y	Y
2014			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	12827.00	22627.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	12827.00	22627.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	3288.21	9246.42
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	3288.21	9246.42
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	28880.58	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	15500.00	

**For further information contact:**

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

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

14020960785

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

Write or Type Committee Name

Zaccaria for Senate

Report Covering the Period: From: 

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	4

 To: 

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A) ...

10800.00

19600.00

(ii) Unitemized .....

1877.00

2877.00

(iii) TOTAL of contributions from individuals .

12677.00

22477.00

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees (such as PACs)...

150.00

150.00

(d) The Candidate .....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

12827.00

22627.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

15000.00

15500.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

15000.00

15500.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.) .....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

27827.00

38127.00

14020960786

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES...	3288.21	9246.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	3288.21	9246.42

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	4341.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	27827.00
25. SUBTOTAL (add Line 23 and Line 24) ...	32168.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	3288.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	28880.58

14020960787

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

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

FOR LINE NUMBER: PAGE 5 OF 15  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<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)  
**Zaccaria for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen W Bestwick**

Mailing Address 63 Whisper Lane

City North Kingstown	State RI	Zip Code 02852
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FEC ID number of contributing federal political committee. **C**

Name of Employer First Point Power	Occupation COO
---------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2014

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 1229

City Bellaire	State TX	Zip Code 77402
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occidental Retrowear	Occupation Corporate officer
--	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2014

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Wm H Clark**

Mailing Address 3716 Maplewood Ave

City Dallas	State TX	Zip Code 75205
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation None
-----------------------------	--------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2014

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020960788

**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 6 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

Full Name (Last, First, Middle Initial) <b>Warren B Galkin</b>		Date of Receipt 08 / 27 / 2014
Mailing Address 29 Sage Dr		Transaction ID : SA11AI.4165
City Warwick	State RI	Zip Code 02886
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Natco Products Corp	Occupation Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>Sharon Gamba</b>		Date of Receipt 09 / 03 / 2014
Mailing Address 106 Mourning Dove Dr		Transaction ID : SA11AI.4228
City Saunderstown	State RI	Zip Code 02874
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Cranston Collision	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>Mark Hawkins</b>		Date of Receipt 09 / 03 / 2014
Mailing Address 89 Minor Rd		Transaction ID : SA11AI.4169
City Saunderstown	State RI	Zip Code 02874
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Dry Bridge Sand & Gravel	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020960789

**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 7 OF 15
	<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"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

Full Name (Last, First, Middle Initial) <b>Ellen Kenner</b>		Date of Receipt MM / DD / YYYY 09 / 06 / 2014
Mailing Address 222 William Henry Rd		Transaction ID : SA11AI.4234
City N. Scituate	State RI	Zip Code 02857
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>Peter Pappas</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2014
Mailing Address 135 W. 18th Street		Transaction ID : SA11AI.4238
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer PJ Mechanical	Occupation Chairman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2850.00
<b>TOTAL</b> This Period (last page this line number only).....	10800.00

14020960790

**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 15  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Carl Matson**

Mailing Address **Hunters Crossing Dr**

City **Coventry** State **RI** Zip Code **02816**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 MM / DD / YYYY  
**09 / 24 / 2014**

Transaction ID : **SA11C.4174**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Senator Nick Kettle**

Mailing Address **5 Autumn Ridge Rd**

City **Coventry** State **RI** Zip Code **02816**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 MM / DD / YYYY  
**09 / 04 / 2014**

Transaction ID : **SA11C.4172**

Amount of Each Receipt this Period  
**50.00**

**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  
 MM / DD / YYYY

Amount of Each Receipt this Period

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

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

**150.00**

**150.00**

14020960791



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

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NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

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

Mailing Address 35 Congdon Hill Rd

City: Sauderstown      State: RI      Zip Code: 02874

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

Name of Employer: self employed      Occupation: marketing consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 15500.00

Date of Receipt: 09 / 25 / 2014

Transaction ID : SA13A.4257

Amount of Each Receipt this Period: 15000.00

**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

Amount of Each Receipt this Period

**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

Amount of Each Receipt this Period

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

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

15000.00

15000.00

14020960792

**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 10 OF 15	
	<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)  
**Zaccaria for Senate**

Full Name (Last, First, Middle Initial) <b>A. Balloons Over RI / BORI Graphics</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2014
Mailing Address 11 Knight St		Amount of Each Disbursement this Period 122.39 Transaction ID : SB17.4242
City Warwick	State RI	
Zip Code 02886	Purpose of Disbursement bumper stickers	Category/ Type 006
Candidate Name <b>Zaccaria for Senate</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: RI District: 02	

Full Name (Last, First, Middle Initial) <b>B. Balloons Over RI / BORI Graphics</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 11 Knight St		Amount of Each Disbursement this Period 171.20 Transaction ID : SB17.4243
City Warwick	State RI	
Zip Code 02886	Purpose of Disbursement lapel stickers	Category/ Type 006
Candidate Name <b>Zaccaria for Senate</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: RI District: 02	

Full Name (Last, First, Middle Initial) <b>C. Bernadette B Dion</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 34 Salem Dr		Amount of Each Disbursement this Period 537.50 Transaction ID : SB17.4246
City North Kingstown	State RI	
Zip Code 02852	Purpose of Disbursement accounting fees through Aug 31, 2014	Category/ Type 001
Candidate Name <b>Zaccaria for Senate</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: RI District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	831.09
<b>TOTAL</b> This Period (last page this line number only) .....	

14020960793

**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 11 OF 15	
	<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)  
**Zaccaria for Senate**

**A. Seven Sails Catering**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Constitution St

City Bristol State RI Zip Code

Purpose of Disbursement food & beverage for 9.25 fundraiser

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President  
State: RI District: 02

Disbursement For: 2014  Primary  General  Other (specify)

Date of Disbursement 09 / 24 / 2014

Amount of Each Disbursement this Period 311.04  
Transaction ID : SB17.4251

**B. Spectrum Marketing Companies**

Full Name (Last, First, Middle Initial)  
Mailing Address 95 Eddy Rd Suite 101

City Manchester State NH Zip Code 03102

Purpose of Disbursement 2200 stakes for yard signes

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President  
State: RI District: 02

Disbursement For: 2014  Primary  General  Other (specify)

Date of Disbursement 08 / 22 / 2014

Amount of Each Disbursement this Period 1012.00  
Transaction ID : SB17.4253

**c. The ICE Agency LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 7630 Post Rd

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement video production for campaign ads

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President  
State: RI District: 02

Disbursement For: 2014  Primary  General  Other (specify)

Date of Disbursement 09 / 29 / 2014

Amount of Each Disbursement this Period 300.00  
Transaction ID : SB17.4264

**SUBTOTAL** of Disbursements This Page (optional) ..... 1623.04

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

14020960794

**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 12 OF 15			
	<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)  
**Zaccaria for Senate**

**A. Mark Zaccaria**

Full Name (Last, First, Middle Initial)  
Mark Zaccaria

Date of Disbursement  
MM / DD / YYYY  
09 / 08 / 2014

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement  
expense reimbursement

Amount of Each Disbursement this Period  
645.50

Transaction ID : SB17.4249

Candidate Name  
**Zaccaria for Senate**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

**B. Mark Zaccaria**

Full Name (Last, First, Middle Initial)  
Mark Zaccaria

Date of Disbursement  
MM / DD / YYYY  
09 / 08 / 2014

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement  
postage

Amount of Each Disbursement this Period  
64.57

Transaction ID : SB17.4249.0

Candidate Name  
**Zaccaria for Senate**

Category/Type  
001

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

[MEMO ITEM]

**C. Mark Zaccaria**

Full Name (Last, First, Middle Initial)  
Mark Zaccaria

Date of Disbursement  
MM / DD / YYYY  
09 / 08 / 2014

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement  
campaign business cards

Amount of Each Disbursement this Period  
77.95

Transaction ID : SB17.4249.1

Candidate Name  
**Zaccaria for Senate**

Category/Type  
006

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 645.50

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

14020960795

**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 13 OF 15
	<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)  
**Zaccaria for Senate**

**A. Mark Zaccaria**

Full Name (Last, First, Middle Initial)

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement office supplies

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 51.97

Transaction ID : SB17.4249.2

[MEMO ITEM]

**B. Mark Zaccaria**

Full Name (Last, First, Middle Initial)

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement restaurant charges to The Americal for food at fundraising event

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 391.01

Transaction ID : SB17.4249.3

[MEMO ITEM]

**c. Mark Zaccaria**

Full Name (Last, First, Middle Initial)

Mailing Address 35 Congdon Hill Rd

City Saunderstown State RI Zip Code 02874

Purpose of Disbursement admission fees to NRI Chamber of Commerce event

Candidate Name Zaccaria for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: RI District: 02

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 60.00

Transaction ID : SB17.4249.4

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only)..... 3099.63

14020960796

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

Transaction ID : SC/10.4162

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

**Mark Zaccaria**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
35 Congdon Hill Rd

City State ZIP Code  
Saunderstown RI 02874

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

**TERMS**

Date Incurred: MM / DD / YYYY  /  /  2014  
Date Due: MM / DD / YYYY  /  /  None  
Interest Rate:  0.00 % (apr)  
Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶ <input type="checkbox"/> 500.00
<b>TOTALS</b> This Period (last page in this line only)...	▶ <input type="checkbox"/>

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

14020960797

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

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

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
**Zaccaria for Senate**

Transaction ID : **SC/10.4257**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Mark Zaccaria</b>		<b>[PERSONAL FUNDS]</b>	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 35 Congdon Hill Rd			
City Saunderstown	State RI	ZIP Code 02874	

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred M 09 / D 25 / Y 2014	Date Due M M / D D / Y Y Y Y none	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	---	-------------------------------	---

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)...	▶ 15000.00
<b>TOTALS</b> This Period (last page in this line)...	▶ 15500.00

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

14020960798

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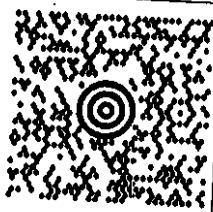
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STAPLES #1036  
1007 TEM ROD ROAD  
NORTH KINGSTOWN RI 02852

0.3 LBS LTR 1 OF 1  
SHP WT: LTR  
DATE: 13 OCT 2014

SHIP TO: OFFICE OF PUBLIC RELATIONS  
SECRETARY OF SENATE  
999 E ST NW

WASHINGTON DC 20463-0001



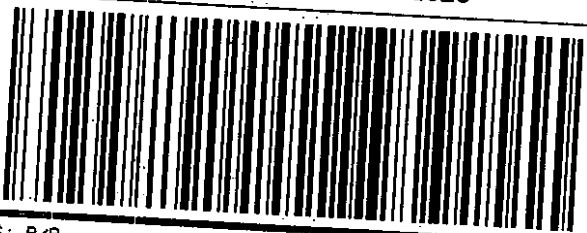
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SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUIL  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

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Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

10/13/14

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

10/16/14  
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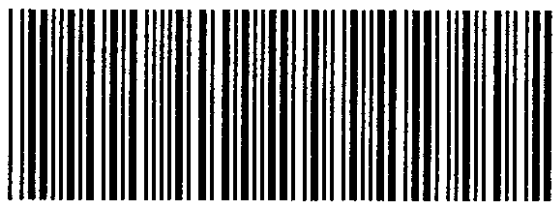
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

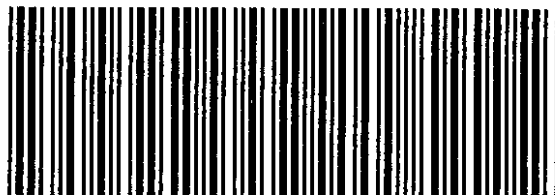
PREPARER MN

DATE PREPARED 10/16/14

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