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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rhode Island Democratic State Committee P.O. Box 6004 ADDRESS (number and street) (Check if address is changed) Providence 02940 RI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sdella1547@aol.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2015 C00136200 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Padwa, Jeffrey, , , Type or Print Name of Treasurer Padwa, Jeffrey, , , [Electronically Filed] 04 19 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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TYPE OF (COMMITTEE e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Domogratic
(d) x	This committee is a STA (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		T age •
•	emocratic State Committee	
	rganization, Affiliated Committee, Joint Fundraising Represe	ntative, or Leadership PAC Sponsor
RHODE ISLAND SENA		
IN IODE ISEAND SEIVE	11E VIOTOR 1 2012	
	701 27 27	
Mailing Address	709A 8TH ST SE	
		DC 20003 TATE ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Rep	presentative Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	tify by name, address (phone number optional) and position of	of the person in possession of committee
Della Rosa,	, Susann, , ,	
	60 Don Avenue	
Mailing Address		
	Rumford	RI 02916
Title or Position	CITY STA	ATE ZIP CODE
Custodian	Telephone number	401 - 438 - 2373
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the conssistant treasurer).	nmittee; and the name and address of
Full Name Padwa, Jeff	frey, , ,	
of Treasurer	25 Margrave Avenue	
Mailing Address		
	L Providence	DI 1 103006
	Providence CITY STA	RI
Title or Position	CITT STP	ALL ZII CODE

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Full Name of Designated Agent		
Mailing Address		
	CITY	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other De	positories: List all banks or other depositories in which the committee depositories funds.	osits funds, holds accounts, rents
	ocitory etc	
Name of Bank, Depo	ository, etc.	
·		
·	1 & T Bank	
·		
<u> </u> M	1 & T Bank	
<u> </u> M	1 & T Bank	20005
<u> </u> M	1 & T Bank 1350 I Street NW Suite 200	
<u> </u> M	1 & T Bank 1350 I Street NW Suite 200 Washington CITY STATE	
Mailing Address Name of Bank, Depo	1 & T Bank 1350 I Street NW Suite 200 Washington CITY STATE	
Mailing Address Name of Bank, Depo	1 & T Bank 1350 I Street NW Suite 200 Washington CITY STATE ository, etc.	
Mailing Address Name of Bank, Depo	1350 I Street NW Suite 200 Washington CITY STATE ository, etc.	
Mailing Address Name of Bank, Depo	1350 I Street NW Suite 200 Washington CITY STATE ository, etc.	ZIP CODE

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Citizens Bank One Citizens Plaza Mailing Address 02903 Providence CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **DSP Joint Victory Account** 434 Fayetteville Street Suite 2020 Mailing Address NC 27601 Raleigh **CITY** STATE 4 ZIP CODE Relationship: X Joint Fundraising Representative Connected Organization Affiliated Committee Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı PNC Bank 650 Pennsylvania Ave SE Mailing Address 20003 Washington CA CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Democratic National Committee/Federal State Party Acct 430 South Capitol St., S.E. Mailing Address Washington DC 20003 **CITY** STATE 4 ZIP CODE Relationship: X Joint Fundraising Representative Connected Organization Affiliated Committee Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı Amalgamated Bank 275 Seventh Avenue Mailing Address 10001 New York, CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor HILLARY VICTORY FUND PO BOX 5256 Mailing Address **NEW YORK** 10185 **CITY** STATE 4 ZIP CODE Relationship: X Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Rhode Island Victory Fund 2018 124 Washington Street Mailing Address MA 02035 Foxboro **CITY** STATE 4 ZIP CODE Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number