

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

MASSACHUSETTS REPUBLICAN PARTY

ADDRESS (number and street)

85 MERRIMAC STREET

STE 505

BOSTON

MA

02114

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00042622

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election
Report for the:☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

MCKENZIE, MINDY, , ,

Signature of Treasurer

MCKENZIE, MINDY, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTYReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
07		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
07		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2026</td></tr></table>	Y	Y	Y	Y	Y	2026						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></</td></tr></table>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								</
Y	Y	Y	Y	Y																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
2026																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							</													



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTY

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	2	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20.82	92936.11
(ii) Unitemized	1219.94	2847.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1240.76	95783.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20.82	8398.97
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1261.58	104182.28
12. Transfers From Affiliated/Other Party Committees.....	35000.00	159542.94
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	125.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	192299.25
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	192299.25
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36261.58	456149.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36261.58	263850.22

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	5186.63	74525.87
(ii) Non-Federal Share.....	19511.67	236585.71
(b) Other Federal Operating Expenditures	5223.53	16678.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29921.83	327789.65
22. Transfers to Affiliated/Other Party Committees.....	36000.00	116135.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	250.00	250.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	504.03
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	504.03
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	66171.83	444678.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46660.16	208092.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1261.58	104182.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1261.58	104182.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	10410.16	91203.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	125.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	10410.16	91078.94

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 37
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐	☐	☐	☐ 17

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City
CHEYENNE

State
WY

Zip Code
82001

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

07 / **03** / **2026**

Transaction ID : SA11AI.172549201

Amount of Each Receipt this Period

178.42

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

B. HALL, JULIE, A, ,

Mailing Address 140 NORTH MAIN STREET

City

ATTLEBORO

State
MA

Zip Code
02703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.82

Date of Receipt

07 / **01** / **2026**

Transaction ID : SA11AI.172549215

Amount of Each Receipt this Period

20.82

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.6661]

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

C. WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City

CHEYENNE

State
WY

Zip Code
82001

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

07 / **06** / **2026**

Transaction ID : SA11AI.172558230

Amount of Each Receipt this Period

216.06

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

20.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 37
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2026

Transaction ID : SA11AI.172618071

Amount of Each Receipt this Period

149.21

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

B. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2026

Transaction ID : SA11AI.172660415

Amount of Each Receipt this Period

138.42

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

C. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2026

Transaction ID : SA11AI.172676070

Amount of Each Receipt this Period

20.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 37

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2026

Transaction ID : SA11AI.172765362

Amount of Each Receipt this Period

56.02

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

B. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2026

Transaction ID : SA11AI.177229526

Amount of Each Receipt this Period

78.42

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

C. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2026

Transaction ID : SA11AI.177265972

Amount of Each Receipt this Period

116.84

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

0.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 37
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐	☐	☐	☐ 17

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City
CHEYENNE

State
WY

Zip Code
82001

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

07 / **16** / **2026**

Transaction ID : SA11AI.177372183

Amount of Each Receipt this Period

39.21

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

B. WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City
CHEYENNE

State
WY

Zip Code
82001

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

07 / **17** / **2026**

Transaction ID : SA11AI.177372179

Amount of Each Receipt this Period

79.21

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

C. WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City
CHEYENNE

State
WY

Zip Code
82001

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

07 / **20** / **2026**

Transaction ID : SA11AI.177406064

Amount of Each Receipt this Period

28.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 37
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2026

Transaction ID : SA11AI.177602238

Amount of Each Receipt this Period

20.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

B. WINREDMailing Address 1603 CAPITOL AVENUE
SUITE 413-B562City
CHEYENNEState
WYZip Code
82001FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54415.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 27 / 2026

Transaction ID : SA11AI.177608362

Amount of Each Receipt this Period

48.02

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

C.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

0.00

20.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 37

☐ 11a	☐ 11b	☒ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
			☐ 17

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. CENTRAL MA CONSERVATIVES PAC

Mailing Address 53 SOUTH ASHBURNHAM RD

City
WESTMINSTERState
MAZip Code
01473FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2026

Transaction ID : SA11C.172560588

Amount of Each Receipt this Period

20.82

☐ Memo ItemEARMARKED THROUGH WINRED [SA11A1.6662];
PERMISSIBLE FUNDS

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

20.82

20.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 37

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

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

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 1ST ST SE

City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

C00003418

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2026

Transaction ID : SA12.172677463

Amount of Each Receipt this Period

35000.00

☐ Memo Item

TRANSFER

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

35000.00

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

35000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. AVAS FLOWERSMailing Address 200 CONTINENTAL DRIVE
SUITE 401City
NEWARKState
DEZip Code
19713Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2026

FEC Identification Number

C

Transaction ID : SB21B.11645

Amount of Each Disbursement this Period

110.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 375 WASHINGTON STREET

City
WOBBURNState
MAZip Code
01801Purpose of Disbursement
EVENT EXPENSE: CATERING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 27 / 2026

FEC Identification Number

C

Transaction ID : SB21B.11651

Amount of Each Disbursement this Period

755.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASH INCMailing Address 302 2ND STREET
SUITE 800City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 24 / 2026

FEC Identification Number

C

Transaction ID : SB21B.11645

Amount of Each Disbursement this Period

92.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

958.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11616

Amount of Each Disbursement this Period

250.02

☐ Memo Item NO FEDERAL CANDIDATES MENTIONED

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11631

Amount of Each Disbursement this Period

3.49

☐ Memo Item NO FEDERAL CANDIDATES MENTIONED

Full Name (Last, First, Middle Initial)

C. PIZZERIA RUSTICO

Mailing Address 85 CANAL STREET

City
BOSTONState
MAZip Code
02114Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11631

Amount of Each Disbursement this Period

31.83

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

285.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY RD SUITE 101

City
MANCHESTERState
NHZip Code
03102

Purpose of Disbursement

CONVENTION EXPENSE: LANYARDS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11472

Amount of Each Disbursement this Period

3820.40

☐ Memo Item**B. UBER**

Mailing Address 1515 THIRD STREET

City
SAN FRANCISCOState
CAZip Code
94158

Purpose of Disbursement

TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11578

Amount of Each Disbursement this Period

28.85

☐ Memo Item**C. UBER**

Mailing Address 1515 THIRD STREET

City
SAN FRANCISCOState
CAZip Code
94158

Purpose of Disbursement

TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11631

Amount of Each Disbursement this Period

39.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3888.30

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1515 THIRD STREET

City
SAN FRANCISCOState
CAZip Code
94158

Purpose of Disbursement

TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11631

Amount of Each Disbursement this Period

32.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1515 THIRD STREET

City
SAN FRANCISCOState
CAZip Code
94158

Purpose of Disbursement

TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB21B.11658

Amount of Each Disbursement this Period

9.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB21B.11588

Amount of Each Disbursement this Period

0.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

43.08

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11592

Amount of Each Disbursement this Period

7.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11594

Amount of Each Disbursement this Period

8.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11600

Amount of Each Disbursement this Period

6.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB21B.11605

Amount of Each Disbursement this Period

5.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11608

Amount of Each Disbursement this Period

0.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11612

Amount of Each Disbursement this Period

2.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4		2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11622

Amount of Each Disbursement this Period

3.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5		2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11626

Amount of Each Disbursement this Period

4.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.11630

Amount of Each Disbursement this Period

1.61

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9.63

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 37

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.11633**

Amount of Each Disbursement this Period

3.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.11636**

Amount of Each Disbursement this Period

1.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.11646**

Amount of Each Disbursement this Period

0.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 37

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.11653

Amount of Each Disbursement this Period

1.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1.98

5223.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 37

☐ 21b	☒ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. NRSC

Mailing Address 425 2ND STREET NE

City
WASHINGTONState
DCZip Code
20002

Purpose of Disbursement

TRANSFER

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00027466**Transaction ID : SB22.116064**

Amount of Each Disbursement this Period

36000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36000.00

36000.00

	21b		22		23		26		27
X	28a		28b		28c		29		30b

MASSACHUSETTS REPUBLICAN PARTY

FEC Schedule B (Form 3X) Rev. 05/2016

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 37

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

23 HD STRATEGIES

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address 337 KENDALL RD

City
TEWKSBURYState
MAZip Code
01876

Outstanding Balance Beginning This Period

6000.00

Transaction ID : SD10.1049799

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CARNEVALE, AMY

Nature of Debt (Purpose):

PAYROLL - ESTIMATED

Mailing Address 20 DODGE ROAD

City
MARBLEHEADState
MAZip Code
01945

Outstanding Balance Beginning This Period

3428.11

Transaction ID : SD10.4545

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3428.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DICICCO GULMAN & CO.

Nature of Debt (Purpose):

**AUDIT SERVICES - AMOUNT OWED IS
DISPUTED**

Mailing Address 155 FEDERAL STREET

City
BOSTONState
MAZip Code
02110

Outstanding Balance Beginning This Period

3381.52

Transaction ID : SD10.975180

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3381.52

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

12809.63

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 25 OF 37

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FIRST STREET PLLC

Nature of Debt (Purpose):

LEGAL CONSULTING

Mailing Address 625 NORTH WASHINGTON STREET SUITE

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

11187.50

Transaction ID : SD10.1067751

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11187.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES, HALEY

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address 314 BUNKER HILL STREET
APT 2

City

BOSTON

State

MA

Zip Code

02129

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD10.6259

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NORTHEAST STRATEGIES LLC

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address P.O BOX. 1392

City

MARBLEHEAD

State

MA

Zip Code

01945

Outstanding Balance Beginning This Period

8000.00

Transaction ID : SD10.1028288

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8000.00

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

29187.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 OF 37

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OX-EYE PROPERTIES

Nature of Debt (Purpose):

RENT

Mailing Address 85 MERRIMAC ST.
5TH FLOORCity
BOSTONState
MAZip Code
02114

Outstanding Balance Beginning This Period

29867.50

Transaction ID : SD10.1115831

Amount Incurred This Period

5973.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

35841.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RED BEACON STRATEGIES

Nature of Debt (Purpose):

DIRECT MAIL SERVICES GENERAL PARTY
FUNDRAISINGMailing Address 9100 CONROY WINDERMERE ROAD
SUITE 200City
WINDERMEREState
FLZip Code
34786

Outstanding Balance Beginning This Period

5051.93

Transaction ID : SD10.1044783

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5051.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RED CURVE SOLUTIONS

Nature of Debt (Purpose):

COMPLIANCE CONSULTING

Mailing Address 100 CUMMINGS CENTER
STE 306-PCity
BEVERLYState
MAZip Code
01915

Outstanding Balance Beginning This Period

61655.48

Transaction ID : SD10.953056

Amount Incurred This Period

2589.27

Payment This Period

0.00

Outstanding Balance at Close of This Period

64244.75

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

105137.68

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 OF 37

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

UNITILL

Nature of Debt (Purpose):

UTILITIESMailing Address **PO BOX 981077**City
BOSTONState
MAZip Code
02298

Outstanding Balance Beginning This Period

382.42**Transaction ID : SD10.975186**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

382.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►**382.42**2) **TOTALS** This Period (last page this line number only)..... ►**147517.23**3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►**0.00**4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►**147517.23**

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

PAGE 28 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163128 ☐ Memo Item			Allocated Activity or Event:	
ADP			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1 ADP BOULEVARD			☐ Voter Drive ☐ Direct Candidate Support	
City ROSELAND	State NJ	Zip Code 07068	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL TAXES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			30285.04	
FEDERAL SHARE		+	NONFEDERAL SHARE	
689.23			2592.83	
		=	TOTAL AMOUNT	
			3282.06	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1161288 ☐ Memo Item			Allocated Activity or Event:	
ADP			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1 ADP BOULEVARD			☐ Voter Drive ☐ Direct Candidate Support	
City ROSELAND	State NJ	Zip Code 07068	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL FEES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			30351.83	
FEDERAL SHARE		+	NONFEDERAL SHARE	
14.03			52.76	
		=	TOTAL AMOUNT	
			66.79	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1165120 ☐ Memo Item			Allocated Activity or Event:	
ADP			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1 ADP BOULEVARD			☐ Voter Drive ☐ Direct Candidate Support	
City ROSELAND	State NJ	Zip Code 07068	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL FEES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			30427.57	
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.91			59.83	
		=	TOTAL AMOUNT	
			75.74	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
719.17		2705.42		3424.59

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 29 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1164180 ☐ Memo Item			Allocated Activity or Event:	
AMAZON			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 440 TERRY AVE N			☐ Voter Drive ☐ Direct Candidate Support	
City SEATTLE	State WA	Zip Code 98109	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			30555.05	
FEDERAL SHARE		+	NONFEDERAL SHARE	
26.77			100.71	
		=	TOTAL AMOUNT	
			127.48	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1160814 ☐ Memo Item			Allocated Activity or Event:	
BOSTON GLOBE			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1 EXCHANGE PLACE			☐ Voter Drive ☐ Direct Candidate Support	
City BOSTON	State MA	Zip Code 02109	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SUBSCRIPTION		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			30591.05	
FEDERAL SHARE		+	NONFEDERAL SHARE	
7.56			28.44	
		=	TOTAL AMOUNT	
			36.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163125 ☐ Memo Item			Allocated Activity or Event:	
CARNEVALE, AMY, , ,			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 20 DODGE ROAD			☐ Voter Drive ☐ Direct Candidate Support	
City MARBLEHEAD	State MA	Zip Code 01945	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			34002.53	
FEDERAL SHARE		+	NONFEDERAL SHARE	
716.41			2695.07	
		=	TOTAL AMOUNT	
			3411.48	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
750.74		2824.22		3574.96

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 30 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1166618 ☐ Memo Item			Allocated Activity or Event:	
CARNEVALE, AMY, , ,			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 20 DODGE ROAD			☐ Voter Drive ☐ Direct Candidate Support	
City MARBLEHEAD	State MA	Zip Code 01945	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			37414.01	
FEDERAL SHARE		+	NONFEDERAL SHARE	
716.41			2695.07	
		=	TOTAL AMOUNT	
			3411.48	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163124 ☐ Memo Item			Allocated Activity or Event:	
CARY, AIDAN, C., ,			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 3 MORNING STAR COURT			☐ Voter Drive ☐ Direct Candidate Support	
City LINCOLN	State RI	Zip Code 02865	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			39962.67	
FEDERAL SHARE		+	NONFEDERAL SHARE	
535.22			2013.44	
		=	TOTAL AMOUNT	
			2548.66	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1166608 ☐ Memo Item			Allocated Activity or Event:	
CARY, AIDAN, C., ,			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 3 MORNING STAR COURT			☐ Voter Drive ☐ Direct Candidate Support	
City LINCOLN	State RI	Zip Code 02865	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			42511.35	
FEDERAL SHARE		+	NONFEDERAL SHARE	
535.22			2013.46	
		=	TOTAL AMOUNT	
			2548.68	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1786.85		6721.97		8508.82

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

PAGE 31 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1164177 ☐ Memo Item			Allocated Activity or Event:	
CONSTANT CONTACT INC			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1601 TRAPELO ROAD			☐ Voter Drive ☐ Direct Candidate Support	
City WALTHAM	State MA	Zip Code 02451	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SUBSCRIPTION		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			43176.48	
FEDERAL SHARE		+	NONFEDERAL SHARE	
139.68			525.45	
		=	TOTAL AMOUNT	
			665.13	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1160812 ☐ Memo Item			Allocated Activity or Event:	
CVS PHARMACY			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 527 BOYLSTON STREET			☐ Voter Drive ☐ Direct Candidate Support	
City BOSTON	State MA	Zip Code 02116	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			43186.34	
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.07			7.79	
		=	TOTAL AMOUNT	
			9.86	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1160817 ☐ Memo Item			Allocated Activity or Event:	
FEDEX			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 942 S SHADY GROVE RD			☐ Voter Drive ☐ Direct Candidate Support	
City MEMPHIS	State TN	Zip Code 38120	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DELIVERY SERVICES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			43197.29	
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.30			8.65	
		=	TOTAL AMOUNT	
			10.95	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.05		541.89		685.94

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 32 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1158663 ☐ Memo Item			Allocated Activity or Event:	
GOOGLE			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1600 AMPHITHEATRE PARKWAY			☐ Voter Drive ☐ Direct Candidate Support	
City MOUNTAIN VIEW	State CA	Zip Code 94043	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SUBSCRIPTION		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			43625.99	
FEDERAL SHARE		+	NONFEDERAL SHARE	
90.03			338.67	
		=	TOTAL AMOUNT	
			428.70	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163137 ☐ Memo Item			Allocated Activity or Event:	
HSA INSURANCE			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address PO BOX 847001			☐ Voter Drive ☐ Direct Candidate Support	
City BOSTON	State MA	Zip Code 02284	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: HEALTH INSURANCE		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			44652.93	
FEDERAL SHARE		+	NONFEDERAL SHARE	
215.66			811.28	
		=	TOTAL AMOUNT	
			1026.94	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163126 ☐ Memo Item			Allocated Activity or Event:	
JONES, HALEY			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 314 BUNKER HILL STREET APT 2			☐ Voter Drive ☐ Direct Candidate Support	
City BOSTON	State MA	Zip Code 02129	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: NON FEA PAYROLL		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			47675.52	
FEDERAL SHARE		+	NONFEDERAL SHARE	
634.74			2387.85	
		=	TOTAL AMOUNT	
			3022.59	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
940.43		3537.80		4478.23

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 33 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1166619 ☐ Memo Item			Allocated Activity or Event:	
JONES, HALEY			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 314 BUNKER HILL STREET			☐ Voter Drive ☐ Direct Candidate Support	
APT 2			☐ Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date	
BOSTON	MA	02129	50698.11	
Purpose of Disbursement:		Category/ Type	Date	
NON FEA PAYROLL			MM / DD / YYYY 07 / 31 / 2026	
Activity or Event Identifier:				
ADMINISTRATIVE				
FEDERAL SHARE		+	NONFEDERAL SHARE	
634.74			2387.85	
		=	TOTAL AMOUNT	
			3022.59	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1158664 ☐ Memo Item			Allocated Activity or Event:	
NUMINAR INC.			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 1201 WILSON BLVD			☐ Voter Drive ☐ Direct Candidate Support	
			☐ Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date	
ARLINGTON	VA	22209	50703.11	
Purpose of Disbursement:		Category/ Type	Date	
SUBSCRIPTION			MM / DD / YYYY 07 / 01 / 2026	
Activity or Event Identifier:				
ADMINISTRATIVE				
FEDERAL SHARE		+	NONFEDERAL SHARE	
1.05			3.95	
		=	TOTAL AMOUNT	
			5.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163135 ☐ Memo Item			Allocated Activity or Event:	
OOMA INC			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 525 ALMANOR AVENUE			☐ Voter Drive ☐ Direct Candidate Support	
SUITE 200			☐ Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date	
SUNNYVALE	CA	94085	50732.87	
Purpose of Disbursement:		Category/ Type	Date	
SUBSCRIPTION			MM / DD / YYYY 07 / 20 / 2026	
Activity or Event Identifier:				
ADMINISTRATIVE				
FEDERAL SHARE		+	NONFEDERAL SHARE	
6.25			23.51	
		=	TOTAL AMOUNT	
			29.76	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
642.04		2415.31		3057.35

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 34 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1164178 ☐ Memo Item			Allocated Activity or Event:	
PRIMO BRANDS			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 900 LONG RIDGE ROAD, BLDG 2			☐ Voter Drive ☐ Direct Candidate Support	
City STAMFORD	State CT	Zip Code 06902	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			50798.82	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
13.85			52.10	65.95

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1159302 ☐ Memo Item			Allocated Activity or Event:	
PRIMO BRANDS			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 900 LONG RIDGE ROAD, BLDG 2			☐ Voter Drive ☐ Direct Candidate Support	
City STAMFORD	State CT	Zip Code 06902	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			50874.32	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
15.85			59.65	75.50

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1158082 ☐ Memo Item			Allocated Activity or Event:	
RED CURVE SOLUTIONS LLC			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 100 CUMMINGS CENTER STE 306-P			☐ Voter Drive ☐ Direct Candidate Support	
City BEVERLY	State MA	Zip Code 01915	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DATA PROCESSING SERVICES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			50980.18	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
22.23			83.63	105.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.93		195.38		247.31

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 35 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1164539 ☐ Memo Item			Allocated Activity or Event:	
STAPLES			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 335 WASHINGTON ST.			☐ Voter Drive ☐ Direct Candidate Support	
City WOBURN	State MA	Zip Code 01801	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			50990.57	
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.18			8.21	
		=	TOTAL AMOUNT	
			10.39	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1164537 ☐ Memo Item			Allocated Activity or Event:	
STAPLES			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 335 WASHINGTON ST.			☐ Voter Drive ☐ Direct Candidate Support	
City WOBURN	State MA	Zip Code 01801	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51138.07	
FEDERAL SHARE		+	NONFEDERAL SHARE	
30.97			116.53	
		=	TOTAL AMOUNT	
			147.50	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163136 ☐ Memo Item			Allocated Activity or Event:	
STAPLES			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 335 WASHINGTON ST.			☐ Voter Drive ☐ Direct Candidate Support	
City WOBURN	State MA	Zip Code 01801	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51193.60	
FEDERAL SHARE		+	NONFEDERAL SHARE	
11.66			43.87	
		=	TOTAL AMOUNT	
			55.53	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.81		168.61		213.42

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 36 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1163122 ☐ Memo Item			Allocated Activity or Event:	
USPS			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 462 WASHINGTON ST.			☐ Voter Drive ☐ Direct Candidate Support	
City WOBURN	State MA	Zip Code 01801	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DELIVERY SERVICES		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51275.60	
FEDERAL SHARE		+	NONFEDERAL SHARE	
17.22			64.78	
		=	TOTAL AMOUNT	
			82.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.1168689 ☐ Memo Item			Allocated Activity or Event:	
VERIZON			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address PO BOX 1100			☐ Voter Drive ☐ Direct Candidate Support	
City ALBANY	State NY	Zip Code 12250	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MOBILE PHONE EXPENSE		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51369.20	
FEDERAL SHARE		+	NONFEDERAL SHARE	
19.66			73.94	
		=	TOTAL AMOUNT	
			93.60	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.1158659 ☐ Memo Item			Allocated Activity or Event:	
VERIZON			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address PO BOX 1100			☐ Voter Drive ☐ Direct Candidate Support	
City ALBANY	State NY	Zip Code 12250	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MOBILE PHONE EXPENSE		☐	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51467.64	
FEDERAL SHARE		+	NONFEDERAL SHARE	
20.67			77.77	
		=	TOTAL AMOUNT	
			98.44	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.55		216.49		274.04

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 37 OF 37

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.1165119 ☐ Memo Item			Allocated Activity or Event:	
ZOOM			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address 55 ALMADEN BLVD 6TH FLOOR			☐ Voter Drive ☐ Direct Candidate Support	
City SAN JOSE	State CA	Zip Code 95113	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SUBSCRIPTION			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			51701.28	
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y 07 23 2026		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
49.06			184.58	233.64

B. Full Name (Last, First, Middle Initial) ☐ Memo Item			Allocated Activity or Event:	
			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address			☐ Voter Drive ☐ Direct Candidate Support	
City	State	Zip Code	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement:			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) ☐ Memo Item			Allocated Activity or Event:	
			☐ Administrative ☐ Fundraising ☐ Exempt	
Mailing Address			☐ Voter Drive ☐ Direct Candidate Support	
City	State	Zip Code	☐ Public Comm (ref to party only) by PAC	
Purpose of Disbursement:			Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				
Category/ Type		Date		
		M M / D D / Y Y Y Y Y Y		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.06		184.58		233.64

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
5186.63		19511.67		24698.30