

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTY

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>		<input type="text" value="13891.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8616.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42003.04"/>	<input type="text" value="573909.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="50619.04"/>	<input type="text" value="587800.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="46859.56"/>	<input type="text" value="584041.09"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3759.48"/>	<input type="text" value="3759.48"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="126626.13"/>	

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

Write or Type Committee Name

MASSACHUSETTS REPUBLICAN PARTY

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

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).....	610.00	270056.66
(ii) Unitemized	26.99	8998.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	636.99	279054.94
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5636.99	285054.94
12. Transfers From Affiliated/Other Party Committees.....	0.00	88857.71
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).....	1416.05	4586.58
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).....	34950.00	195410.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	34950.00	195410.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	42003.04	573909.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7053.04	378499.23

DETAILED SUMMARY PAGE
of Disbursements

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	10971.66	106112.23
(ii) Non-Federal Share.....	35732.39	375288.77
(b) Other Federal Operating Expenditures	155.51	34155.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	46859.56	515556.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	68284.15
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	0.00	200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	200.00
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	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	46859.56	584041.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11127.17	208752.32

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)	5636.99	285054.94
34. Total Contribution Refunds (from Line 28(d))	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5636.99	284854.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11127.17	140268.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1416.05	4586.58
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9711.12	135681.59

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MILLER, JOHN, , ,

Mailing Address **40 WESTLAND AVE**

City WINCHESTER	State MA	Zip Code 01890
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 / 31 / 2025

Transaction ID : SA11A1.6024

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6005]

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SEARLES, LISA, , ,

Mailing Address **135 TICKLE RD**

City WESTPORT	State MA	Zip Code 02790
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) NANNY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 30 / 2025

Transaction ID : SA11A1.6022

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6004]

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SPOLSINO, NICHOLAS, , ,

Mailing Address **26 HONEYSUCKLE LN**

City HANOVER	State MA	Zip Code 02339
------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) MCGOVERN AUTO	Occupation (for Individual) DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt
12 / 03 / 2025

Transaction ID : SA11A1.6019

Amount of Each Receipt this Period
85.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.5942]

SUBTOTAL of Receipts This Page (optional).....	610.00
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: (check only one)	PAGE 7 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

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 ▼
203608.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2025

Transaction ID : SA11AI.5942

Amount of Each Receipt this Period
88.37

Memo Item

TOTAL EARMARKED THROUGH WINRED PAC LIMIT NOT AFFECTED:SEE ITEMIZED IF REQUIRED

B. WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

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 ▼
203618.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2025

Transaction ID : SA11AI.6002

Amount of Each Receipt this Period
9.61

Memo Item

TOTAL EARMARKED THROUGH WINRED PAC LIMIT NOT AFFECTED:SEE ITEMIZED IF REQUIRED

C. WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

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 ▼
203627.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2025

Transaction ID : SA11AI.6003

Amount of Each Receipt this Period
9.60

Memo Item

TOTAL EARMARKED THROUGH WINRED 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: (check only one)	PAGE 8 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

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 ▼
203651.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2025

Transaction ID : SA11AI.6004

Amount of Each Receipt this Period
24.01

Memo Item

TOTAL EARMARKED THROUGH WINRED PAC LIMIT NOT AFFECTED:SEE ITEMIZED IF REQUIRED

B. WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

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 ▼
204132.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2025

Transaction ID : SA11AI.6005

Amount of Each Receipt this Period
480.30

Memo Item

TOTAL EARMARKED THROUGH WINRED PAC LIMIT NOT AFFECTED:SEE ITEMIZED IF REQUIRED

C.

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

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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	610.00

**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 32
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ZENECA INC. POLITICAL ACTION COMMITTEE (AZPAC)

Mailing Address C/O ZENECA INC.
1800 CONCORD PIKE, PO BOX 15437

City WILMINGTON	State DE	Zip Code 19850
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FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : SA11C.6016

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
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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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 32
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. OFF THE RAILS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 COMMERCIAL STREET

City WORCESTER	State MA	Zip Code 01608
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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 ▼
1416.05

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2025

Transaction ID : SA15.6014

Amount of Each Receipt this Period
1416.05

Memo Item
VENDOR REFUND: OVERPAYMENT

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

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

Amount of Each Receipt this Period

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1416.05
TOTAL This Period (last page this line number only).....	1416.05

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. WINRED TECHNICAL SERVICES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 03 / 2025

FEC Identification Number: C
Transaction ID : SB21B.6072

Amount of Each Disbursement this Period: 0.99

Memo Item

B. WINRED TECHNICAL SERVICES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 05 / 2025

FEC Identification Number: C
Transaction ID : SB21B.6073

Amount of Each Disbursement this Period: 3.63

Memo Item

C. WINRED TECHNICAL SERVICES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 22 / 2025

FEC Identification Number: C
Transaction ID : SB21B.6074

Amount of Each Disbursement this Period: 0.39

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5.01

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			23			2025					

Mailing Address 1776 WILSON BLVD SUITE 530

City
ARLINGTON

State
VA

Zip Code
22219

Purpose of Disbursement
MERCHANT FEES

FEC Identification Number

Transaction ID : SB21B.6075

Amount of Each Disbursement this Period

 0.39

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

 0.39

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

 5.40

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 ROAD			
City TEWKSBURY	State MA	Zip Code 01876	

Outstanding Balance Beginning This Period <input type="text" value="10855.00"/>	Transaction ID : SD10.4532	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4855.00"/>	Outstanding Balance at Close of This Period <input type="text" value="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 MARBLEHEAD	State MA	Zip Code 01945	

Outstanding Balance Beginning This Period <input type="text" value="23903.74"/>	Transaction ID : SD10.4545	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6799.38"/>	Outstanding Balance at Close of This Period <input type="text" value="17104.36"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG, HUNTER, , ,			Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 31 M ST APT 3			
City SOUTH BOSTON	State MA	Zip Code 02127	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4531	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="23104.36"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. 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 BOSTON	State MA	Zip Code 02110	

Outstanding Balance Beginning This Period <input type="text" value="3381.52"/>	Transaction ID : SD10.4122	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3381.52"/>

B. 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 STE 325			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="11187.50"/>	Transaction ID : SD10.5232	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11187.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES, HALEY, , ,			Nature of Debt (Purpose): EXPENSE REIMBURSEMENT
Mailing Address 314 BUNKER HILL STREET APT 2			
City BOSTON	State MA	Zip Code 02129	

Outstanding Balance Beginning This Period <input type="text" value="365.21"/>	Transaction ID : SD10.5510	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="365.21"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="14569.02"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. 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 : SD10.4126	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OX-EYE PROPERTIES			Nature of Debt (Purpose): RENT
Mailing Address 85 MERRIMAC ST. 5TH FLOOR			
City BOSTON	State MA	Zip Code 02114	

Outstanding Balance Beginning This Period 24396.98	Transaction ID : SD10.5509	
Amount Incurred This Period 5973.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 30370.48

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED BEACON STRATEGIES			Nature of Debt (Purpose): DIRECT MAIL SERVICES GENERAL PARTY FUNDRAISING
Mailing Address 9100 CONROY WINDERMERE ROAD			
City WINDERMERE	State FL	Zip Code 34786	

Outstanding Balance Beginning This Period 5051.93	Transaction ID : SD10.4432	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5051.93

1) SUBTOTALS This Period This Page (optional)..... ▶	43422.41
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 16 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 138 CONANT STREET SUITE 401			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period 42647.92		Transaction ID : SD10.4128	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45147.92	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UNITILL			Nature of Debt (Purpose): UTILITIES
Mailing Address PO BOX 981077			
City BOSTON	State MA	Zip Code 02298	

Outstanding Balance Beginning This Period 382.42		Transaction ID : SD10.4130	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 382.42	

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)..... ▶	45530.34
2) TOTALS This Period (last page this line number only)..... ▶	126626.13
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) ▶	126626.13

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)
 MASSACHUSETTS REPUBLICAN PARTY

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
23 HD 08-B (12/31/2025) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2.6428	42.78 %	57.22 %
Lincoln-Reagan Reception 2025 (05/29/2025) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported Transaction ID : H2.6078	50.13 %	49.87 %
_____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	%	%
_____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	%	%
_____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	%	%
_____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	%	%

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MASSACHUSETTS REPUBLICAN PARTY	MM / DD / YYYY 12 / 01 / 2025	450.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	450.00
Transaction ID : H3.6025	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MASSACHUSETTS REPUBLICAN PARTY	MM / DD / YYYY 12 / 12 / 2025	10000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	10000.00
Transaction ID : H3.6026	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MASSACHUSETTS REPUBLICAN PARTY	MM / DD / YYYY 12 / 17 / 2025	3500.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	3500.00
Transaction ID : H3.6027	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MASSACHUSETTS REPUBLICAN PARTY	MM / DD / YYYY 12 / 30 / 2025	21000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	21000.00
Transaction ID : H3.6028	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	34950.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	34950.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6031** Memo Item

JONES, HALEY, , ,

Mailing Address 314 BUNKER HILL STREET
APT 2

City BOSTON State MA Zip Code 02129

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 424253.77

Date 12 / 01 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
585.44		2202.35		2787.79

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6037** Memo Item

CARNEVALE, AMY, , ,

Mailing Address 20 DODGE ROAD

City MARBLEHEAD State MA Zip Code 01945

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 427653.45

Date 12 / 01 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.93		2685.75		3399.68

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6040** Memo Item

MILLIGAN, JOHN, , ,

Mailing Address 25 PLEASANT WOOD DR

City FORESTDALE State MA Zip Code 02644

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 428961.59

Date 12 / 01 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.71		1033.43		1308.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1574.08		5921.53		7495.61

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6046** Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL TAXES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 431522.30

Date 12 / 01 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
537.75		2022.96		2560.71

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6055** Memo Item

GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 431997.20

Date 12 / 01 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.73		375.17		474.90

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6053** Memo Item

NUMINAR INC.

Mailing Address 1201 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 432002.20

Date 12 / 09 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.05		3.95		5.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
638.53		2402.08		3040.61

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6044 Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL FEES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 432064.33

Date 12 / 12 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.05		49.08		62.13

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.6033 Memo Item

JONES, HALEY, , ,

Mailing Address 314 BUNKER HILL STREET APT 2

City BOSTON State MA Zip Code 02129

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 435154.96

Date 12 / 15 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.03		2441.60		3090.63

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6038 Memo Item

CARNEVALE, AMY, , ,

Mailing Address 20 DODGE ROAD

City MARBLEHEAD State MA Zip Code 01945

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 438554.66

Date 12 / 15 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.94		2685.76		3399.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1376.02		5176.44		6552.46

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6047 Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL TAXES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 440864.74

Date 12 / 15 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
485.12		1824.96		2310.08

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.6041 Memo Item

HSA INSURANCE

Mailing Address PO BOX 847001

City BOSTON State MA Zip Code 02284

Purpose of Disbursement: HEALTH INSURANCE

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 441915.87

Date 12 / 16 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.74		830.39		1051.13

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6009 Memo Item

CRAIG, HUNTER, , ,

Mailing Address 31 M ST APT 3

City SOUTH BOSTON State MA Zip Code 02127

Purpose of Disbursement: ADMINISTRATIVE CONSULTING

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 444415.87

Date 12 / 17 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
525.00		1975.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1230.86		4630.35		5861.21

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

NAME OF COMMITTEE (In Full)

MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6042 Memo Item

IPFS CORPORATION

Mailing Address 3522 THOMASVILLE RD

City TALLAHASSEE State FL Zip Code 32309

Purpose of Disbursement: INSURANCE

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 444600.40

Date: 12 / 18 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.75		145.78		184.53

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.6029 Memo Item

FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 444626.24

Date: 12 / 22 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.43		20.41		25.84

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6054 Memo Item

CONSTANT CONTACT INC

Mailing Address 1601 TRAPELO ROAD

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 445242.49

Date: 12 / 22 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.41		486.84		616.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.59		653.03		826.62

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6051** Memo Item

PRIMO BRANDS

Mailing Address 900 LONG RIDGE ROAD, BLDG 2

City STAMFORD State CT Zip Code 06902

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 445360.50

Date 12 / 23 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.78		93.23		118.01

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6056** Memo Item

ZOOM

Mailing Address 55 ALMADEN BLVD 6TH FLOOR

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 445594.14

Date 12 / 23 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.06		184.58		233.64

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6045** Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL FEES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 445651.02

Date 12 / 26 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.94		44.94		56.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.78		322.75		408.53

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6052** Memo Item

BOSTON GLOBE

Mailing Address 1 EXCHANGE PLACE

City BOSTON State MA Zip Code 02109

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 445687.02

Date 12 / 26 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.56		28.44		36.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6011** Memo Item

CARNEVALE, AMY, , ,

Mailing Address 20 DODGE ROAD

City MARBLEHEAD State MA Zip Code 01945

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 449086.70

Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.93		2685.75		3399.68

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6012** Memo Item

CARNEVALE, AMY, , ,

Mailing Address 20 DODGE ROAD

City MARBLEHEAD State MA Zip Code 01945

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 452486.40

Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.94		2685.76		3399.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1435.43		5399.95		6835.38

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6032 Memo Item

JONES, HALEY, , ,

Mailing Address 314 BUNKER HILL STREET
APT 2

City BOSTON State MA Zip Code 02129

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 455490.49

Date: 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.86		2373.23		3004.09

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.6039 Memo Item

CARNEVALE, AMY, , ,

Mailing Address 20 DODGE ROAD

City MARBLEHEAD State MA Zip Code 01945

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 458890.17

Date: 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.93		2685.75		3399.68

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6043 Memo Item

VERIZON

Mailing Address PO BOX 1100

City ALBANY State NY Zip Code 12250

Purpose of Disbursement: MOBILE PHONE EXPENSE

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date: 458973.77

Date: 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.56		66.04		83.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1362.35		5125.02		6487.37

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6048 Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL TAXES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 461226.88

Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
473.15		1779.96		2253.11

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.6049 Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL TAXES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 462088.36

Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.91		680.57		861.48

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6050 Memo Item

ADP

Mailing Address 1 ADP BOULEVARD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement: NON FEA PAYROLL TAXES

Activity or Event Identifier: Administrative

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

Allocated Activity or Event Year-To-Date 462949.82

Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.91		680.55		861.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
834.97		3141.08		3976.05

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

NAME OF COMMITTEE (In Full) MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6010** Memo Item Allocated Activity or Event:

23 HD STRATEGIES Administrative Fundraising Exempt

Mailing Address 337 KENDALL ROAD Voter Drive Direct Candidate Support

City TEWKSBURY State MA Zip Code 01876 Public Comm (ref to party only) by PAC

Purpose of Disbursement: FUNDRAISING CONSULTING Allocated Activity or Event Year-To-Date 4855.00

Activity or Event Identifier: 23 HD 08-B(12/31/2025) Category/Type Date 12 / 31 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2076.97		2778.03		4855.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6061** Memo Item Allocated Activity or Event:

THE IRVING Administrative Fundraising Exempt

Mailing Address 65 EXETER STREET Voter Drive Direct Candidate Support

City BOSTON State MA Zip Code 02116 Public Comm (ref to party only) by PAC

Purpose of Disbursement: EVENT EXPENSE: FOOD & BEVERAGE Allocated Activity or Event Year-To-Date 0.00

Activity or Event Identifier: Lincoln-Reagan Reception 2025(05/29/2025) Category/Type Date 05 / 29 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.15		130.47		261.62

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.6426** Memo Item Allocated Activity or Event:

TROPHIES AND AWARDS Administrative Fundraising Exempt

Mailing Address 419 NEPONSET STREET Voter Drive Direct Candidate Support

City CANTON State MA Zip Code 02021 Public Comm (ref to party only) by PAC

Purpose of Disbursement: EVENT AWARD Allocated Activity or Event Year-To-Date 0.00

Activity or Event Identifier: Lincoln-Reagan Reception 2025(05/29/2025) Category/Type Date 05 / 29 / 2025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.93		51.66		103.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2076.97		2778.03		4855.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
MASSACHUSETTS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6007
JONES, HALEY, , ,
Mailing Address 314 BUNKER HILL STREET APT 2
City BOSTON State MA Zip Code 02129
Purpose of Disbursement: EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS
Activity or Event Identifier: Lincoln-Reagan Reception 2025(05/29/2025)
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 13596.18
Date 12 / 17 / 2025
FEDERAL SHARE 183.08 + NONFEDERAL SHARE 182.13 = TOTAL AMOUNT 365.21

B. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
Allocated Activity or Event Year-To-Date
Date
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
Allocated Activity or Event Year-To-Date
Date
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT
Values: 183.08, 182.13, 365.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT
Values: 10971.66, 35732.39, 46704.05