

# 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

RIMF

ADDRESS (number and street) 33 COLLEGE HILL ROAD  
SUITE 20F  
 Check if different than previously reported. (ACC) WARWICK RI 02886

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00688564

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 18 / 2018 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2018

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 06 / 2018

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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

RIMF

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="2018"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25000.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="155400.00"/>	<input type="text" value="180400.00"/>
(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="180400.00"/>	<input type="text" value="180400.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="171491.42"/>	<input type="text" value="171491.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8908.58"/>	<input type="text" value="8908.58"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**RIMF**

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).....	155400.00	180400.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	155400.00	180400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	155400.00	180400.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
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	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	155400.00	180400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	155400.00	180400.00

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	16491.42	16491.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16491.42	16491.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	155000.00	155000.00
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	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
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)) ..	171491.42	171491.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	171491.42	171491.42

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	155400.00	180400.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	155400.00	180400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16491.42	16491.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16491.42	16491.42

**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 12
	<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)  
**RIMF**

**A. CHARTIER STREET NOMINEE GROUP**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 35

City SOUTH ATTLEBORO	State MA	Zip Code 02703
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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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION

**B. CLAIRE BANCROFT TRUST**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 HAMMARLUND WAY

City MIDDLETOWN	State RI	Zip Code 02842
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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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

**Transaction ID : SA11AI.4127**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 101 DYER ST.

City PROVIDENCE	State RI	Zip Code 02903
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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 ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

**Transaction ID : SA11AI.4125**

Amount of Each Receipt this Period  
50000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> 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 7 OF 12  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**RIMF**

**A. O'NEIL, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 761 CURTIS CORNER ROAD  
 City WAKEFIELD State RI Zip Code 02879  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) O'NEIL CONSULTING GROUP INC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 19 / 2018  
**Transaction ID : SA11AI.4102**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item CONTRIBUTION

**B. O'NEIL, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 761 CURTIS CORNER ROAD  
 City WAKEFIELD State RI Zip Code 02879  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) O'NEIL CONSULTING GROUP INC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 30 / 2018  
**Transaction ID : SA11AI.4124**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**C. REMINC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 HAMMARLUND WAY  
 City MIDDLETOWN State RI Zip Code 02842  
 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 ▼ 25000.00

Date of Receipt 10 / 29 / 2018  
**Transaction ID : SA11AI.4129**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50000.00  
**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 8 OF 12  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
**RIMF**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
VERROCHI, CAROL, , ,

Mailing Address 35 THOMAS ROAD

City BERKLEY	State MA	Zip Code 02779
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

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

**Transaction ID : SA11AI.4130**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION

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

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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	155400.00



**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)  
**RIMF**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 2200 WILSON BLVD

City  
ARLINGTON

State  
VA

Zip Code  
22210

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4133**  
Amount of Each Disbursement this Period  
[ ] 252.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE 100

City  
WARRENTON

State  
VA

Zip Code  
20186

Purpose of Disbursement  
LEGAL CONSULTING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4131**  
Amount of Each Disbursement this Period  
[ ] 3300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE 100

City  
WARRENTON

State  
VA

Zip Code  
20186

Purpose of Disbursement  
LEGAL CONSULTING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4119**  
Amount of Each Disbursement this Period  
[ ] 3931.25

Memo Item

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

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

7483.25
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**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)  
**RIMF**

Full Name (Last, First, Middle Initial) <b>A. MERCURY PUBLIC AFFAIRS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 22 / 2018	
Mailing Address 200 VARICK STREET SUITE 600			
City NEW YORK	State NY	Zip Code 10014	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		FEC Identification Number C	
Candidate Name		Transaction ID : <b>SB21B.4121</b> Amount of Each Disbursement this Period 6000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. MERCURY PUBLIC AFFAIRS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y Y 11 / 26 / 2018	
Mailing Address 200 VARICK STREET SUITE 600			
City NEW YORK	State NY	Zip Code 10014	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		FEC Identification Number C	
Candidate Name		Transaction ID : <b>SB21B.4123</b> Amount of Each Disbursement this Period 3008.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:	<input type="checkbox"/> Memo Item		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9008.17
<b>TOTAL</b> This Period (last page this line number only).....	16491.42

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIMF
FEC IDENTIFICATION NUMBER C C00688564

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 21 W PENNSYLVANIA AVE STE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure MEDIA
Name of Federal Candidate: FLANDERS, ROBERT MR, , , Support
Office Sought: Senate State: RI
Calendar Year-To-Date Per Election for Office Sought 35000.00
Disbursement For: General 2018

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 21 W PENNSYLVANIA AVE STE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure MEDIA
Name of Federal Candidate: FLANDERS, ROBERT MR, , , Support
Office Sought: Senate State: RI
Calendar Year-To-Date Per Election for Office Sought 107000.00
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 95000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIMF
FEC IDENTIFICATION NUMBER C C00688564

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 21 W PENNSYLVANIA AVE STE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure MEDIA
Name of Federal Candidate: FLANDERS, ROBERT MR, , ,
Calendar Year-To-Date Per Election for Office Sought 155000.00
Disbursement For: General 2018

Full Name of Payee RED OCTOBER PRODUCTIONS INC
Mailing Address 1851 A MCGLUCKIAN STREET
City ANNAPOLIS State MD Zip Code 21401
Purpose of Expenditure MEDIA
Name of Federal Candidate: FLANDERS, ROBERT MR, , ,
Calendar Year-To-Date Per Election for Office Sought 47000.00
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 60000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 155000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature