

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Rhode Island Democratic State Committee

ADDRESS (number and street) P.O. Box 6004
 Check if different than previously reported. (ACC)
Providence RI 02940

2. **FEC IDENTIFICATION NUMBER** C00136200
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 Quarterly 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2011 through 02 28 2011

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 Jeffrey Padwa

Signature of Treasurer Electronically Filed by Jeffrey Padwa Date 03 20 2011

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

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XN**
Transaction ID :

The loan on Schedule C has no interest rate and no determined due date. No employees worked more than 25% on a federal campaign.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		43617.11
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	36843.19									
(c) Total Receipts (from Line 19)	18415.79	27319.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55258.98	70936.32								
7. Total Disbursements (from Line 31)	16692.28	32369.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38566.70	38566.70								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	5254.47									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Rhode Island Democratic State Committee

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

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)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	8220.00	14369.50
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)	378.57	378.57
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)	9817.22	12571.14
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	9817.22	12571.14
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18415.79	27319.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8598.57	14748.07

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3643.76	7287.50
(ii) Non-Federal Share.....	6477.81	12955.54
(b) Other Federal Operating Expenditures.....	6570.71	10561.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16692.28	30804.62
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 Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	1565.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	1565.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16692.28	32369.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10214.47	19414.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10214.47	17849.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	378.57	378.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9835.90	17470.51

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

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

FOR LINE NUMBER: PAGE 7 / 22
(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)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 8220.00

Date of Receipt: MM / DD / YYYY
02 / 03 / 2011

Transaction ID: SA12.17537

Amount of Each Receipt this Period: 3220.00

In-kind - On-Line Voter File Access

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13598.57

Date of Receipt: MM / DD / YYYY
02 / 11 / 2011

Transaction ID: SA12.17514

Amount of Each Receipt this Period: 5000.00

Transfer

SUBTOTAL of Receipts This Page (optional) ► 8220.00

TOTAL This Period (last page this line number only) ► 8220.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 22	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A.	Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
	Mailing Address 430 South Capitol St. SE		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Washington	DC	20003
	FEC ID number of contributing federal political committee.		Transaction ID: SA15.17530
	<input type="text" value="C"/> C00010603		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="378.57"/>
Receipt For:		Aggregate Year-to-Date ▼	Share of telephone service
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="8598.57"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="378.57"/>
TOTAL This Period (last page this line number only)	<input type="text" value="378.57"/>

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"/> 24	<input type="checkbox"/> 25	<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)
Rhode Island Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 South Capitol St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-kind - On-Line Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17538 Date of Disbursement 02 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 3220.00</p>
<p>B. Full Name (Last, First, Middle Initial) Stephanie DeSilva</p> <p>Mailing Address 17 Waldron Avenue</p> <p>City Cranston State RI Zip Code 02910</p> <p>Purpose of Disbursement Net wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17510 Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1522.99</p>
<p>C. Full Name (Last, First, Middle Initial) Division of Taxation</p> <p>Mailing Address One Capitol Hill</p> <p>City Providence State RI Zip Code 02908</p> <p>Purpose of Disbursement State Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17515 Date of Disbursement 02 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 113.43</p>

SUBTOTAL of Disbursements This Page (optional)	4856.42
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Rhode Island Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) John McKenzie</p> <p>Mailing Address 53 Columbus Avenue</p> <p>City North Providence State RI Zip Code 02911</p> <p>Purpose of Disbursement Net wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17512</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="337.20"/></p>
<p>B. Full Name (Last, First, Middle Initial) Edwin Pacheco</p> <p>Mailing Address 12 Camp Dixie Road</p> <p>City Pascoag State RI Zip Code 02859</p> <p>Purpose of Disbursement Net wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17513</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="531.65"/></p>
<p>C. Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address PO Box 660351</p> <p>City Dallas State TX Zip Code 75266</p> <p>Purpose of Disbursement Federal Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17516</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="800.44"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1669.29"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6525.71"/>

SCHEDULE C (FEC Form 3X)

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

PAGE 11 / 22
FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

Transaction ID: SC/9.5183

LOAN SOURCE Full Name (Last, First, Middle Initial) Licht 88 Committee	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 350 Cole Avenue	
City Providence State RI ZIP Code 02906	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5249.87	0.00	5249.87

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>1</td><td>1</td><td>9</td><td>8</td><td>8</td></tr> </table>	M	M	D	D	Y	Y	Y	Y	1	2	3	1	1	9	8	8			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M	D	D	Y	Y	Y	Y												
1	2	3	1	1	9	8	8												

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="5249.87"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="5249.87"/>

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 22	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHELDON II WHITEHOUSE			Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address 32 ELMGROVE AVENUE			
City PROVIDENCE	State RI	ZIP Code 02906	

Outstanding Balance Beginning This Period		Transaction ID: SD9.14176	
4.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4.60	

1) SUBTOTALS This Period This Page (optional).....	4.60
2) TOTALS This Period (last page this line number only).....	4.60
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	5249.87
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	5254.47

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

NAME OF COMMITTEE (In Full)
 Rhode Island Democratic State Committee

NAME OF ACCOUNT RI Democratic Non-federal Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 1	TOTAL AMOUNT TRANSFERRED 9817.22
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	9817.22	Transaction ID: H3.17531
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	9817.22
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)	9817.22

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) 151 Broadway Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 151 Broadway			Allocated Activity or Event Year-To-Date 10771.47		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>		
Providence	RI	02903			
Purpose of Disbursement: Rent and utilities			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17496		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
234.00		416.00		650.00

B. Full Name (Last, First, Middle Initial) A T & T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 536216			Allocated Activity or Event Year-To-Date 10878.00		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>		
Atlanta	GA	30353			
Purpose of Disbursement: Cell phone service			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17497		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.35		68.18		106.53

C. Full Name (Last, First, Middle Initial) Susann Della Rosa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 60 Don Avenue			Allocated Activity or Event Year-To-Date 13228.00		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>		
Rumford	RI	02916			
Purpose of Disbursement: Accounting services - non employee			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17500		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
846.00		1504.00		2350.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1118.35		1988.18		3106.53

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Division of Taxation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address One Capitol Hill			Allocated Activity or Event Year-To-Date 13341.43																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>2</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	0	2	D	D	1	3	Y	Y	Y	Y	2	0	1	1
M	M																				
0	2																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	1	1																		
Providence	RI	02908																			
Purpose of Disbursement: State payroll taxes			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: H4.17502																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.83		72.60		113.43

B. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 13739.43																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>2</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	0	2	D	D	1	3	Y	Y	Y	Y	2	0	1	1
M	M																				
0	2																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	1	1																		
Albany	NY	12250																			
Purpose of Disbursement: Telephone service			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: H4.17507																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.28		254.72		398.00

C. Full Name (Last, First, Middle Initial) John McKenzie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 53 Columbus Avenue			Allocated Activity or Event Year-To-Date 13772.49																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>2</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	0	2	D	D	1	3	Y	Y	Y	Y	2	0	1	1
M	M																				
0	2																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	1	1																		
North Providence	RI	02911																			
Purpose of Disbursement: Reimbursement			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: H4.17517																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.90		21.16		33.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
196.01		348.48		544.49

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 551 North Main Street			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02906	Date MM / DD / YYYY 02 / 13 / 2011		
Purpose of Disbursement: Office supplies			Transaction ID: H4.17523		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.90		21.16		33.06

B. Full Name (Last, First, Middle Initial) Chase Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15153			Allocated Activity or Event Year-To-Date 13999.62		
City Wilmington	State DE	Zip Code 19886	Date MM / DD / YYYY 02 / 13 / 2011		
Purpose of Disbursement: Credit card payment			Transaction ID: H4.17518		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.77		145.36		227.13

C. Full Name (Last, First, Middle Initial) Providence Place Mall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Providence Place			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02903	Date MM / DD / YYYY 02 / 13 / 2011		
Purpose of Disbursement: Parking fee			Transaction ID: H4.17520		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.52		4.48		7.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.77		145.36		227.13

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Constant Contact			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1601 Trapelo Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City Waltham	State MA	Zip Code 02451	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; display: inline-block; padding: 2px;">02 / 13 / 2011</div>	
Purpose of Disbursement: E-mail list				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17521	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.40		25.60		40.00

B. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 551 North Main Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City Providence	State RI	Zip Code 02906	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; display: inline-block; padding: 2px;">02 / 13 / 2011</div>	
Purpose of Disbursement: Office supplies				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17522	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.40		27.37		42.77

C. Full Name (Last, First, Middle Initial) CVS Pharmacy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 799 Hope Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City Providence	State RI	Zip Code 02906	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; display: inline-block; padding: 2px;">02 / 13 / 2011</div>	
Purpose of Disbursement: Office supplies				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.17532	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.95		39.02		60.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Venda Ravioli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 265 Atwells Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02903	Date M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 1 1		
Purpose of Disbursement: Gift Basket			Transaction ID: H4.17533		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.50		48.89		76.39

B. Full Name (Last, First, Middle Initial) Edwin Pacheco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12 Camp Dixie Road			Allocated Activity or Event Year-To-Date 14778.43		
City Pascoag	State RI	Zip Code 02859	Date M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 1 1		
Purpose of Disbursement: Reimbursement			Transaction ID: H4.17519		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
280.37		498.44		778.81

C. Full Name (Last, First, Middle Initial) United States Treasury			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660351			Allocated Activity or Event Year-To-Date 15578.86		
City Dallas	State TX	Zip Code 75266	Date M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 1 1		
Purpose of Disbursement: Payroll tax deposit			Transaction ID: H4.17506		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.15		512.28		800.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
568.52		1010.72		1579.24

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Stephanie DeSilva

Mailing Address
17 Waldron Avenue

City	State	Zip Code
Cranston	RI	02910

Purpose of Disbursement:
Net wages

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17101.85

Activity or Event Identifier:
Administrative

Date

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

Transaction ID: H4.17501

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
548.28		974.71		1522.99

B. Full Name (Last, First, Middle Initial)
Edwin Pacheco

Mailing Address
12 Camp Dixie Road

City	State	Zip Code
Pascoag	RI	02859

Purpose of Disbursement:
Net wages

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17633.50

Activity or Event Identifier:
Administrative

Date

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

Transaction ID: H4.17503

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
191.39		340.26		531.65

C. Full Name (Last, First, Middle Initial)
Providence Biltmore

Mailing Address
Kennedy Plaza

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Parking fee

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

Date

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

Transaction ID: H4.17525

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.40		9.60		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
739.67		1314.97		2054.64

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

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Hemenway's Seafood

Mailing Address
1 Providence Washington Plaza

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 1 1

Transaction ID: H4.17526

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.09		28.60		44.69

B. Full Name (Last, First, Middle Initial)
Local 121 Restaurant

Mailing Address
121 Washington Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 1 1

Transaction ID: H4.17527

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.69		26.11		40.80

C. Full Name (Last, First, Middle Initial)
Camille's

Mailing Address
71 Bradford Street

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement:
Meeting

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

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

Transaction ID: H4.17528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.54		47.18		73.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Theodore Francis Green Airport			Allocated Activity or Event Year-To-Date [0.00]		
City Warwick	State RI	Zip Code 02886	Date M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1		
Purpose of Disbursement: Airfare			Transaction ID: H4.17529		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[69.26]		[123.14]		[192.40]

B. Full Name (Last, First, Middle Initial) Washington Marriott			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2660 Woodley Road NW			Allocated Activity or Event Year-To-Date [0.00]		
City Washington	State DC	Zip Code 20008	Date M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1		
Purpose of Disbursement: Lodging			Transaction ID: H4.17535		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[148.39]		[263.81]		[412.20]

C. Full Name (Last, First, Middle Initial) John McKenzie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 53 Columbus Avenue			Allocated Activity or Event Year-To-Date [17970.70]		
City North Providence	State RI	Zip Code 02911	Date M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1		
Purpose of Disbursement: Net wages			Transaction ID: H4.17504		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[121.39]		[215.81]		[337.20]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[121.39]		[215.81]		[337.20]

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

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

NAME OF COMMITTEE (In Full)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Rhode Island			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 1057			Allocated Activity or Event Year-To-Date 20046.59																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02901																							
Purpose of Disbursement: Health Insurance			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	7	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	2	7	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.17498																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
747.32		1328.57		2075.89

B. Full Name (Last, First, Middle Initial) Cox Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 20103.94																						
City	State	Zip Code	Category/ Type																						
Newark	NJ	07101																							
Purpose of Disbursement: Cable service			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	7	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	2	7	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.17499																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.65		36.70		57.35

C. Full Name (Last, First, Middle Initial) Regime Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 208 Laurel Hill Avenue			Allocated Activity or Event Year-To-Date 20243.04																						
City	State	Zip Code	Category/ Type																						
Providence	RI	02909																							
Purpose of Disbursement: Office printing			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	7	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	2	7	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.17505																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.08		89.02		139.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
818.05		1454.29		2272.34

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
3643.76		6477.81		10121.57