

# 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**  
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 ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00136200 3. IS THIS REPORT NEW (N) OR AMENDED (A)  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on **11** / **06** / **2018** in the State of **RI**  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on / / in the State of

5. Covering Period **10** / **01** / **2018** through **10** / **17** / **2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Padwa, Jeffrey, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Padwa, Jeffrey, , ,* [Electronically Filed] Date **10** / **26** / **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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Rhode Island Democratic State Committee

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"/>		28672.90
(b) Cash on Hand at Beginning of Reporting Period.....	321407.80	
(c) Total Receipts (from Line 19) .....	324586.79	1869618.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	645994.59	1898291.16
7. Total Disbursements (from Line 31).....	322070.93	1574367.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	323923.66	323923.66
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	5254.47	
10. Debts and Obligations Owed <b>BY</b> 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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Rhode Island Democratic State Committee**

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).....	33000.00	790500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	33000.00	790500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29500.00	149011.20
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	62500.00	939511.20
12. Transfers From Affiliated/Other Party Committees.....	163444.58	548402.91
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	6042.09
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	49829.13	268030.72
(b) Levin Funds (from Schedule H5) .....	48813.08	107631.34
(c) Total Transfers (add 18(a) and 18(b))..	98642.21	375662.06
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	324586.79	1869618.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	225944.58	1493956.20

**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 .....	14168.44	98140.50
(ii) Non-Federal Share.....	53298.64	369102.74
(b) Other Federal Operating Expenditures .....	23859.20	155449.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	91326.28	622692.99
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) .....	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	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 .....	12975.63	34984.19
(ii) "Levin" Share.....	48813.08	131607.15
(b) Federal Election Activity Paid Entirely With Federal Funds .....	168955.94	785083.17
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	230744.65	951674.51
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	322070.93	1574367.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	219959.21	1073657.61

**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) .....	62500.00	939511.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	62500.00	939511.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	38027.64	253590.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	38027.64	253590.25

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

The loan on Schedule C has no interest rate and no determined due date.

Form/Schedule:  
Transaction ID:

**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 114
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)  
**Rhode Island Democratic State Committee**

**A. Alba-Wilbur, Melissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 Crest Circle  
 City Smithfield State RI Zip Code 02917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physical Therapy Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : SA11AI.33804**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Aparicio, Mary Ann Zynsky, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 216 Olney Street  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : SA11AI.33785**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Babineau, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Holly Lane  
 City Barrington State RI Zip Code 02806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lifespan Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : SA11AI.33787**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<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: (check only one)	PAGE 8 OF 114
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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)  
**Rhode Island Democratic State Committee**

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

Mailing Address 118 Crothers Avenue

City Cranston	State RI	Zip Code 02910
------------------	-------------	-------------------

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

Name of Employer (for Individual) Gencorp Insurance	Occupation (for Individual) Executive
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2018

**Transaction ID : SA11AI.33748**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 222 N. LaSalle

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Artist
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2018

**Transaction ID : SA11AI.33792**

Amount of Each Receipt this Period  
4000.00

Memo Item

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

Mailing Address 251 George Street

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2018

**Transaction ID : SA11AI.33753**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<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: (check only one)	PAGE 9 OF 114
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**Rhode Island Democratic State Committee**

**A. Murdoch, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 E 26th St  
 Ste 602  
 City New York State NY Zip Code 10010-1505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 21CF Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 14 / 2018  
**Transaction ID : SA11AI.33765**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. Murray, J. Terrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 El Brillo Way  
 City Palm Beach State FL Zip Code 33480  
 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 ▼ 5000.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : SA11AI.33795**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Picerne, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Lambert Lind Hwy  
 City Warwick State RI Zip Code 02886  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Picerne Properties Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : SA11AI.33796**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20000.00
<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: (check only one)	PAGE 10 OF 114
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**Rhode Island Democratic State Committee**

**A. Sweitzer, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 Major Potter Road  
 City Warwick State RI Zip Code 02886  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IGT Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 03 / 2018  
**Transaction ID : SA11AI.33749**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Tansey, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 Bristol Ferry Road  
 City Portsmouth State RI Zip Code 02871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : SA11AI.33751**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Wyman, Julia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Briarfield Road  
 City Barrington State RI Zip Code 02806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RI Sea Grant Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : SA11AI.33783**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	33000.00

**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 11 OF 114
<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

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. AMERICA WORKS PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 15293

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00331694

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 M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : SA11C.33763**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. BIG SKY VALUES PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3242 CUMMINS WAY

City MISSOULA	State MT	Zip Code 59802
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00650754

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : SA11C.33805**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Emily's List**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1800 M Street NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193433

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 M	/	D D D	/	Y Y Y Y Y Y
10		05		2018

**Transaction ID : SA11C.33758**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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: (check only one)	PAGE 12 OF 114
<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

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. END CITIZENS UNITED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 66005

City WASHINGTON	State DC	Zip Code 20035
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00573261

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 M	/	D D D	/	Y Y Y Y Y Y
10		03		2018

**Transaction ID : SA11C.33755**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. M-PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 607 14th Street N.W. Suite 800

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365270

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 M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : SA11C.33762**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. Machinists Non-Partisan Political League**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 9000 Machinist PL

City Upper Marlboro	State MD	Zip Code 20772
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C70000435

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 M	/	D D D	/	Y Y Y Y Y Y
10		01		2018

**Transaction ID : SA11C.33797**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 13 OF 114  
(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. NARRAGANSETT BAY PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 8628  
 City Cranston State RI Zip Code 02920  
 FEC ID number of contributing federal political committee. **C** C00403592  
 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 M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2018  
**Transaction ID : SA11C.33759**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. SIEMENS CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 NEW JERSEY AVENUE, NW SUITE 1000  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00353797  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2018  
**Transaction ID : SA11C.33764**  
 Amount of Each Receipt this Period  
 1000.00  
 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 M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	29500.00

**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 14 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. ACTBLUE**

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

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
97119.87

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2018

**Transaction ID : SA12.33794**

Amount of Each Receipt this Period  
29583.38

Memo Item  
Transfer

**B. Rintels, Peter, , ,**

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

Mailing Address 161 Power Street

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Heme Oncology Association Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2018

**Transaction ID : SA12.33794.0**

Amount of Each Receipt this Period  
1000.00

Memo Item  
ActBlue

**C. Winsor, Ellen, , ,**

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

Mailing Address 736 East Shore Road

City Jamestown	State RI	Zip Code 02835
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Self-Employed Policy Advocate

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2018

**Transaction ID : SA12.33794.1**

Amount of Each Receipt this Period  
2700.00

Memo Item  
ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	29583.38
<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: (check only one)	PAGE 15 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. King, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Slater Avenue  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Editor  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA12.33794.2**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item ActBlue

**B. Nichols, Dane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1521 29th Street NW  
 City Washington State DC Zip Code 20007  
 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 ▼ 3500.00

Date of Receipt 09 / 27 / 2018  
**Transaction ID : SA12.33794.3**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item ActBlue

**C. Galvin, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Jeffrey Drive  
 City No Attleboro State MA Zip Code 02760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AAA Northeast Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 26 / 2018  
**Transaction ID : SA12.33794.4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 16 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Copp, Belton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 Keene Street  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fall River Public Schools Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2018  
**Transaction ID : SA12.33794.5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 ActBlue

**B. Brewster, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 94 Congdon Street  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Topping Fund LLC Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : SA12.33794.6**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 ActBlue

**C. Rockefeller, Clay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 532 Kinsley Avenue  
 City Providence State RI Zip Code 02909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : SA12.33794.7**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 17 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Tansey, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 Hope Street  
 City Bristol State RI Zip Code 02809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : SA12.33794.8**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 ActBlue

**B. Kohlenberg, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 235  
 City Westport State MA Zip Code 02791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Howland Evangelista Kohlenber Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : SA12.33794.9**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 ActBlue

**C. Dangremond, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 193 Summit View Lane  
 City North Kingstown State RI Zip Code 02852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Independent Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : SA12.33794.10**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 18 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Weizenbaum, Miriam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 199 North Main Street  
 City Providence State RI Zip Code 02903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DeLuca & Weizenbaum Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA12.33794.11**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

**B. Sloane, Barry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 Mystic Avenue  
 City Medford State MA Zip Code 02155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Century Bank Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA12.33794.12**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

**C. Farmer, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 362 Benefit Street  
 City Providence State RI Zip Code 02903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA12.33794.13**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 19 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Lee, Brooke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 271 Angell Street  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eugene Lee Inc. Occupation (for Individual) Design Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA12.33794.14**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

**B. Squibb, Robin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 259 Benefit Street  
 City Providence State RI Zip Code 02903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Granny Squibb Company Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA12.33794.15**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 ActBlue

**C. Burns, J.Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 72 Fogland Road  
 City Tiverton State RI Zip Code 02878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brown Rudnick Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA12.33794.16**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 20 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Stephens, Erich, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Exeter Street  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vineyard Wind LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2018  
**Transaction ID : SA12.33794.17**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

**B. Nordstrom, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 94 Blackstone Boulevard  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M Financial Group Occupation (for Individual) Insurance Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA12.33794.18**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 ActBlue

**C. Boudreau, Andre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 756  
 City Block Island State RI Zip Code 02807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Construction  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA12.33794.19**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 ActBlue

**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 21 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Biggs, Gretchen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Fenway Road  
 City Westerly State RI Zip Code 02891  
 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 **09 / 28 / 2018**  
**Transaction ID : SA12.33794.20**  
 Amount of Each Receipt this Period 500.00  
 Memo Item ActBlue

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 382110  
 City Cambridge State MA Zip Code 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100981.07

Date of Receipt **10 / 12 / 2018**  
**Transaction ID : SA12.33798**  
 Amount of Each Receipt this Period 3861.20  
 Memo Item Transfer

**C. Morse, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 833 Hartford Avenue  
 City Johnston State RI Zip Code 02919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Law Offices of Mark Morse Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 01 / 2018**  
**Transaction ID : SA12.33798.0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3861.20
<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: (check only one)	PAGE 22 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Paolino, Joseph, , , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Westminster Street

City Providence	State RI	Zip Code 02903
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Paolino Properties	Occupation (for Individual) Managing Partner
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

**Transaction ID : SA12.33798.1**

Amount of Each Receipt this Period  
2500.00

Memo Item  
ActBlue

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

Mailing Address 170 Adams Point Road

City Barrington	State RI	Zip Code 02806
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Ava Anderson LLC	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2018

**Transaction ID : SA12.33798.2**

Amount of Each Receipt this Period  
1000.00

Memo Item  
ActBlue

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

Mailing Address 335 Frenchtown Road

City East Greenwich	State RI	Zip Code 02818
------------------------	-------------	-------------------

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 ▼  
60.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2018

**Transaction ID : SA12.33798.3**

Amount of Each Receipt this Period  
20.00

Memo Item  
ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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: (check only one)	PAGE 23 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. Rhode Island Victory Fund 2018**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 124 Washington Street  
Suite 101  
City Foxboro State MA Zip Code 02035  
FEC ID number of contributing federal political committee. **C** C00629907  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 157500.00

Date of Receipt **10 / 09 / 2018**  
**Transaction ID : SA12.33791**  
Amount of Each Receipt this Period 12500.00  
 Memo Item  
Joint Fundraiser Proceeds

**B. Ferenbach, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2 Commonwealth Avenue  
City Boston State MA Zip Code 02116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
High Meadows Foundation Chairman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 9900.00

Date of Receipt **09 / 28 / 2018**  
**Transaction ID : SA12.33791.0**  
Amount of Each Receipt this Period 9900.00  
 Memo Item  
Victory Fund

**C. END CITIZENS UNITED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 66005  
City WASHINGTON State DC Zip Code 20035  
FEC ID number of contributing federal political committee. **C** C00573261  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 28 / 2018**  
**Transaction ID : SA12.33791.1**  
Amount of Each Receipt this Period 2500.00  
 Memo Item  
Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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: (check only one)	PAGE 24 OF 114
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Rhode Island Democratic State Committee**

**A. WHITEHOUSE FOR SENATE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410803

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

**Transaction ID : SA12.33728**

Amount of Each Receipt this Period  
28750.00

Memo Item  
Transfer

**B. WHITEHOUSE FOR SENATE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410803

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2018

**Transaction ID : SA12.33727**

Amount of Each Receipt this Period  
28750.00

Memo Item  
Transfer

**C. WHITEHOUSE FOR SENATE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 40280

City PROVIDENCE	State RI	Zip Code 02940
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410803

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
117500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : SA12.33718**

Amount of Each Receipt this Period  
60000.00

Memo Item  
Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117500.00
<b>TOTAL</b> This Period (last page this line number only).....	163444.58



**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

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**

Full Name (Last, First, Middle Initial)

**A. Citizens Bank**

Mailing Address One Citizens Plaza

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Checkbook Supplies

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.33641**  
Amount of Each Disbursement this Period  
895.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. Connie Grosch Photography**

Mailing Address 20 Freese Street

City Providence State RI Zip Code 02908

Purpose of Disbursement  
Photography Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.33744**  
Amount of Each Disbursement this Period  
415.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Division of Taxation**

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement  
State Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.33642**  
Amount of Each Disbursement this Period  
83.05

Memo Item

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

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

1393.23

**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

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**

Full Name (Last, First, Middle Initial)

**A. Fay, Carol, , ,**

Mailing Address 184 University Avenue

City Providence State RI Zip Code 02906

Purpose of Disbursement  
Interpreting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.33738  
Amount of Each Disbursement this Period  
210.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. High Output Inc**

Mailing Address 495 Turnpike Street

City Canton State MA Zip Code 02021

Purpose of Disbursement  
Production Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.33736  
Amount of Each Disbursement this Period  
15837.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Federal Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.33643  
Amount of Each Disbursement this Period  
745.40

Memo Item

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

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

16792.44



**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

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**

Full Name (Last, First, Middle Initial)

**A. Sentinel Limousine**

Mailing Address 11 Clemenceau Street

City East Providence State RI Zip Code 02914

Purpose of Disbursement  
Transportation Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.33735**  
Amount of Each Disbursement this Period  
487.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. West, Christine, , ,**

Mailing Address 16 Kathleen Drive

City Westerly State RI Zip Code 02891

Purpose of Disbursement  
Interpreting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.33742**  
Amount of Each Disbursement this Period  
280.59

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

768.09

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

23770.20

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. Alonzo, Elvira, , ,**

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB30B.33466**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Alonzo, Elvira, , ,**

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB30B.33498**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alonzo, Elvira, , ,**

Mailing Address 8068 Ransum Street

City Queen's Village State NY Zip Code 11427

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB30B.33557**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Andruet, Bastien, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 15 Pine Hill Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33645</b> Amount of Each Disbursement this Period [REDACTED] 1205.00	
City No Scituate	State RI	Zip Code 02857	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Anziani, Cinthia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 31 Burnett Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33494</b> Amount of Each Disbursement this Period [REDACTED] 159.00	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Anziani, Cinthia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 31 Burnett Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33568</b> Amount of Each Disbursement this Period [REDACTED] 62.70	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1426.70
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)  
**A. A T & T Mobility**

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement Phones and Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33646

Amount of Each Disbursement this Period: 192.57

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bauerle, Brenton, , ,**

Mailing Address 207 Pinecrest Drive

City No Kingstown State RI Zip Code 02852

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33647

Amount of Each Disbursement this Period: 1205.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bouchard Gold Communications**

Mailing Address 5900 Balcones Drive

City Austin State TX Zip Code 78731

Purpose of Disbursement Printing Exempt Mail

Candidate Name WHITEHOUSE, SHELDON II, , ,

Office Sought:  House  Senate  President  
State: RI District: 00

Disbursement For: 2018  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 16 / 2018

FEC Identification Number: C S6R100221

Transaction ID : SB30B.33795

Amount of Each Disbursement this Period: 43537.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 44934.57

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Bourdeau, Moise, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 296 Greenwood Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33715</b> Amount of Each Disbursement this Period [REDACTED] 268.46	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HealthSource RI</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address PO Box 9711		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33715</b> Amount of Each Disbursement this Period [REDACTED] 268.46	
City Providence	State RI	Zip Code 02940	Category/ Type [REDACTED]
Purpose of Disbursement Health Insurance		Candidate Name	
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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Bourdeau, Moise, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 296 Greenwood Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33648</b> Amount of Each Disbursement this Period [REDACTED] 1229.44	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1497.90
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Boyd, Jameson, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33460</b> Amount of Each Disbursement this Period [REDACTED] 323.55	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Boyd, Jameson, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33502</b> Amount of Each Disbursement this Period [REDACTED] 556.80	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Boyd, Jameson, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 114 Vinton Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.3355t</b> Amount of Each Disbursement this Period [REDACTED] 352.95	
City Providence,	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1233.30
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Bramblet, Sarah, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 16 Anthony Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33649</b> Amount of Each Disbursement this Period 1205.00	
City Johnston	State RI	Zip Code 02919	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. Cabrega, Josefina, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 30 Woodbine Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33454</b> Amount of Each Disbursement this Period 495.75	
City Cranston	State RI	Zip Code 02910	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. Cabrega, Josefina, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 30 Woodbine Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33506</b> Amount of Each Disbursement this Period 524.55	
City Cranston	State RI	Zip Code 02910	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2225.30
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Cabrega, Josefina, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 30 Woodbine Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33547</b>	
City Cranston	State RI	Zip Code 02910	Amount of Each Disbursement this Period [REDACTED] 425.25
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>B. Caicedo, Jonathan, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 72 Marshall Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33458</b>	
City Providence	State RI	Zip Code 02909	Amount of Each Disbursement this Period [REDACTED] 225.45
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C. Caicedo, Jonathan, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 72 Marshall Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33503</b>	
City Providence	State RI	Zip Code 02909	Amount of Each Disbursement this Period [REDACTED] 187.80
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

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

838.50

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Catone, Reinaldo, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 37 Homer Street		FEC Identification Number C [ ] <b>Transaction ID : SB30B.33516</b> Amount of Each Disbursement this Period [ ] 598.80	
City Providence	State RI	Zip Code 02907	Category/ Type [ ]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Catone, Reinaldo, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 37 Homer Street		FEC Identification Number C [ ] <b>Transaction ID : SB30B.33553</b> Amount of Each Disbursement this Period [ ] 281.70	
City Providence	State RI	Zip Code 02907	Category/ Type [ ]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cifuentes, Melissa, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 29 Galileo Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB30B.3365t</b> Amount of Each Disbursement this Period [ ] 282.69	
City Providence	State RI	Zip Code 02909	Category/ Type [ ]
Purpose of Disbursement Net Wages		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1163.19
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. Corti, James, , , Jr.**

Mailing Address 50 Tamarack Trail

City Stockholm State NJ Zip Code 07460

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33651**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Davis, Erika, , ,**

Mailing Address 468 Wickenden Street

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33577**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Division of Taxation**

Mailing Address One Capitol Hill

City Providence State RI Zip Code 02908

Purpose of Disbursement  
State Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33652**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

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

**A. Dooley, Jesse, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 112 Lexington Avenue

City Cranston State RI Zip Code 02910

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33653

Amount of Each Disbursement this Period: 1205.00

Memo Item

**B. Fales, Connor, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3 Lowell Street

City Taunton State MA Zip Code 02760

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33686

Amount of Each Disbursement this Period: 1205.00

Memo Item

**C. Familia, Rosemeri, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 62 Kossuth Street

City Providence State RI Zip Code 02909

Purpose of Disbursement Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33517

Amount of Each Disbursement this Period: 219.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2629.75

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. Familia, Rosemeri, , ,**

Mailing Address 62 Kossuth Street

City Providence State RI Zip Code 02909

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33564**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Fenzl, Jake, , ,**

Mailing Address 2206 Teardrop Avenue

City Columbus State OH Zip Code 43235

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33654**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fleming, Daisy, , ,**

Mailing Address 29 Rovensky Avenue

City Newport State RI Zip Code 02840

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33655**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Flores, Kimberly, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 62 Aldine Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33656</b> Amount of Each Disbursement this Period [REDACTED] 658.97	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Folcarelli, David, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 201 Broadway		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33657</b> Amount of Each Disbursement this Period [REDACTED] 1182.44	
City Providence	State RI	Zip Code 02903	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fox, Kristina, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 12 Wolf Hill Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33722</b> Amount of Each Disbursement this Period [REDACTED] 876.12	
City Smithfield	State RI	Zip Code 02917	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2717.53
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

Full Name (Last, First, Middle Initial)

**A. Fuller, Austin, , ,**

Mailing Address 80 Orleton Court

City  
Cheshire

State  
CT

Zip Code  
06410

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.33658**

Amount of Each Disbursement this Period

1543.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Glad, Elizabeth, , ,**

Mailing Address 24 Blodgett Avenue

City  
Pawtucket

State  
RI

Zip Code  
02860

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.33659**

Amount of Each Disbursement this Period

1157.12

Memo Item

Full Name (Last, First, Middle Initial)

**C. Grande, Andrew, , ,**

Mailing Address PO Box 3731

City  
Cranston

State  
RI

Zip Code  
02910

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.3366t**

Amount of Each Disbursement this Period

1543.60

Memo Item

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

4244.32

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Griffin, Patrick, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 4640 Post Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33661</b> Amount of Each Disbursement this Period [REDACTED] 1157.12	
City East Greenwich	State RI	Zip Code 02821	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Harrison, Roxanne, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 384 Potters Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33474</b> Amount of Each Disbursement this Period [REDACTED] 132.00	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HealthSource RI</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address PO Box 9711		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33662</b> Amount of Each Disbursement this Period [REDACTED] 3714.76	
City Providence	State RI	Zip Code 02940	Category/ Type [REDACTED]
Purpose of Disbursement Health Insurance		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5003.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Heredia, Yojaida, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 50 Rowan Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33663</b> Amount of Each Disbursement this Period [REDACTED] 421.19	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Hernandez, Juana, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 95 Alexander St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33526</b> Amount of Each Disbursement this Period [REDACTED] 412.50	
City North Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Hernandez, Juana, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 95 Alexander St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33552</b> Amount of Each Disbursement this Period [REDACTED] 292.20	
City North Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1125.89
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

**A. Hofman, Robert, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 951 County Road 27

City Oxford State NY Zip Code 13830

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 15 / 2018

FEC Identification Number C

Transaction ID : SB30B.33664

Amount of Each Disbursement this Period 1182.44

Memo Item

**B. Hustle**

Full Name (Last, First, Middle Initial)

Mailing Address 343 Sansome Street

City San Francisco State CA Zip Code 94104

Purpose of Disbursement Messaging Platform

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 09 / 2018

FEC Identification Number C

Transaction ID : SB30B.33789

Amount of Each Disbursement this Period 207.19

Memo Item

**C. Internal Revenue Service**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement Federal Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 15 / 2018

FEC Identification Number C

Transaction ID : SB30B.33665

Amount of Each Disbursement this Period 25653.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 27043.57

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Ivonnet, Gilma, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 1048 Cranston		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33462</b>	
City Cranston	State RI	Zip Code 02920	Amount of Each Disbursement this Period [REDACTED] 256.05
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>B. Ivonnet, Gilma, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 1048 Cranston		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33501</b>	
City Cranston	State RI	Zip Code 02920	Amount of Each Disbursement this Period [REDACTED] 599.70
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C. Jaime, Marianela, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 100 Indiana Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33511</b>	
City Providence	State RI	Zip Code 02905	Amount of Each Disbursement this Period [REDACTED] 284.70
Purpose of Disbursement Canvass Stipend		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1140.45
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Jaime, Mariana, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 100 Indiana Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33570</b> Amount of Each Disbursement this Period [REDACTED] 44.70	
City Providence	State RI	Zip Code 02905	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Joharjian, Alina, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 6 Merit Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33666</b> Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Cranston	State RI	Zip Code 02920	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Jorge, Edwin, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 145 Metropolitan Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33533</b> Amount of Each Disbursement this Period [REDACTED] 368.70	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

1618.40

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Jorge, Edwin, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 145 Metropolitan Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33561</b> Amount of Each Disbursement this Period [REDACTED] 211.80	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jorge, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 145 Metropolitan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33667</b> Amount of Each Disbursement this Period [REDACTED] 620.98	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kreger, Charlotte, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 9 Amy Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33668</b> Amount of Each Disbursement this Period [REDACTED] 1157.12	
City Providence	State RI	Zip Code 02906	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1989.90
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

Full Name (Last, First, Middle Initial)

**A. Lomazzo, Marco, , ,**

Mailing Address 131 Moore Street

City  
Providence

State  
RI

Zip Code  
02907

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33521**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lomazzo, Marco, , ,**

Mailing Address 131 Moore Street

City  
Providence

State  
RI

Zip Code  
02907

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33563**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. London, Jake, , ,**

Mailing Address 55 Bradford Street

City  
Providence

State  
RI

Zip Code  
02903

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33671**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

**A. Lopez, Erminia Garcia, , ,**

Mailing Address 201 Congress Street

City  
Providence

State  
RI

Zip Code  
02905

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB30B.33464

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lopez, Erminia Garcia, , ,**

Mailing Address 201 Congress Street

City  
Providence

State  
RI

Zip Code  
02905

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB30B.33499

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lopez, Erminia Garcia, , ,**

Mailing Address 201 Congress Street

City  
Providence

State  
RI

Zip Code  
02905

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB30B.33548

Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Lysik, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 147 Oakwoods Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33669</b> Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Wakefield	State RI	Zip Code 02879	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Machado Arabi, Yanet, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33520</b> Amount of Each Disbursement this Period [REDACTED] 415.50	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Machado Arabi, Yanet, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33545</b> Amount of Each Disbursement this Period [REDACTED] 393.30	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2013.80
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Maria, Kenia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 22 Spooner Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33559</b> Amount of Each Disbursement this Period [REDACTED] 225.00	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Mariano, Dorko, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 394 Blackstone Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33531</b> Amount of Each Disbursement this Period [REDACTED] 337.50	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Mariano, Dorko, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 394 Blackstone Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33561</b> Amount of Each Disbursement this Period [REDACTED] 144.30	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 706.80
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Martinez, Amalia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 163 Laurel Hill Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33490</b> Amount of Each Disbursement this Period [REDACTED] 56.55	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Martinez, Carlos, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 243 Smith St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33525</b> Amount of Each Disbursement this Period [REDACTED] 371.55	
City Providence	State RI	Zip Code 02908	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. McCadden, Collin, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 154 Riverdell Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33671</b> Amount of Each Disbursement this Period [REDACTED] 1157.12	
City Saunderstown	State RI	Zip Code 02874	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1585.22
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

**A. Ortiz, Edwin, J, ,**

Mailing Address 38 Mt. Pleasant Ave.

City Providence State RI Zip Code 02908

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33497

Amount of Each Disbursement this Period

[REDACTED] 178.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ortiz, Edwin, J, ,**

Mailing Address 38 Mt. Pleasant Ave.

City Providence State RI Zip Code 02908

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33555

Amount of Each Disbursement this Period

[REDACTED] 260.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. Park, Sam, , ,**

Mailing Address 4325 Lowvorn Road

City Carrollton State GA Zip Code 30117

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.33673

Amount of Each Disbursement this Period

[REDACTED] 633.62

Memo Item

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

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

[REDACTED] 1072.37

[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

Full Name (Last, First, Middle Initial)

**A. Perdomo, David, , ,**

Mailing Address 28 Privet

City  
Pawtucket

State  
RI

Zip Code  
02860

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.33495**

Amount of Each Disbursement this Period

124.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Perez, Jose, F., ,**

Mailing Address 203 Adelaide Avenue

City  
Providence

State  
RI

Zip Code  
02907

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.33456**

Amount of Each Disbursement this Period

250.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. Perez, Jose, F., ,**

Mailing Address 203 Adelaide Avenue

City  
Providence

State  
RI

Zip Code  
02907

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2018			

FEC Identification Number

**C**

**Transaction ID : SB30B.33505**

Amount of Each Disbursement this Period

566.55

Memo Item

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

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

941.70

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Perez, Jose, F., ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33546</b> Amount of Each Disbursement this Period [REDACTED] 519.30	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>B. Perez, Liseth, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 67 Salmon Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33558</b> Amount of Each Disbursement this Period [REDACTED] 232.20	
City Providence	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>C. Perez, Mercedes, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33438</b> Amount of Each Disbursement this Period [REDACTED] 228.30	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 979.80
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Perez, Mercedes, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33512</b> Amount of Each Disbursement this Period [REDACTED] 457.20	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Perez, Mercedes, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 203 Adelaide Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33556</b> Amount of Each Disbursement this Period [REDACTED] 259.95	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PhoneBurrner Inc</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018	
Mailing Address 1968 S. Coast Highway		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33691</b> Amount of Each Disbursement this Period [REDACTED] 307.00	
City Laguna Beach	State CA	Zip Code 92651	Category/ Type [REDACTED]
Purpose of Disbursement Subscription		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1024.15
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. PhoneBurrner Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2018

Mailing Address 1968 S. Coast Highway

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33724**  
 Amount of Each Disbursement this Period  
 [ ] 1966.80

City Laguna Beach State CA Zip Code 92651

Purpose of Disbursement  
Subscription

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Postmaster**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2018

Mailing Address Turnkey Station

FEC Identification Number

**C** S6R100221  
**Transaction ID : SB30B.33800**  
 Amount of Each Disbursement this Period  
 [ ] 15583.70

City Providence State RI Zip Code 02940

Purpose of Disbursement  
Postage Exempt Mail

[ ]  
Category/  
Type

Candidate Name

**WHITEHOUSE, SHELDON II, , ,**  
 Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: RI District: 00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rego, Charles, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2018

Mailing Address 324 Newman Avenue

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33493**  
 Amount of Each Disbursement this Period  
 [ ] 243.45

City Rumford State RI Zip Code 02916

Purpose of Disbursement  
Canvass Stipend

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

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

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

[ ] 17793.95  
 [ ]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Rego, Charles, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 324 Newman Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33551</b> Amount of Each Disbursement this Period [REDACTED] 318.45	
City Rumford	State RI	Zip Code 02916	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Rego, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 324 Newman Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33674</b> Amount of Each Disbursement this Period [REDACTED] 1543.60	
City Rumford	State RI	Zip Code 02916	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Rhau, Michelle, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 384 Union Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33676</b> Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Cranston	State RI	Zip Code 02909	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3067.05
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Rodriguez Chaple, Barbaro, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33481</b> Amount of Each Disbursement this Period [REDACTED] 288.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>B. Rodriguez Chaple, Barbaro, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33492</b> Amount of Each Disbursement this Period [REDACTED] 591.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>C. Rodriguez Chaple, Barbaro, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 158 Crescent Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33545</b> Amount of Each Disbursement this Period [REDACTED] 579.75	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1459.65
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Rodriuez Guzman, Amarilis, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 383 Blackstone Street		FEC Identification Number C [ ] <b>Transaction ID : SB30B.33491</b> Amount of Each Disbursement this Period [ ] 122.25	
City Providence	State RI	Zip Code 02907	Category/ Type [ ]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rodriuez Guzman, Amarilis, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 383 Blackstone Street		FEC Identification Number C [ ] <b>Transaction ID : SB30B.33567</b> Amount of Each Disbursement this Period [ ] 72.00	
City Providence	State RI	Zip Code 02907	Category/ Type [ ]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sanchez, Lesbia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [ ] <b>Transaction ID : SB30B.33448</b> Amount of Each Disbursement this Period [ ] 322.20	
City Providence	State RI	Zip Code 02909	Category/ Type 001
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 516.45
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Sanchez, Lesbia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33522</b> Amount of Each Disbursement this Period [REDACTED] 412.20	
City Providence	State RI	Zip Code 02909	Category/ Type 001
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. Sanchez, Lesbia, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 173 Roosevelt Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33560</b> Amount of Each Disbursement this Period [REDACTED] 212.55	
City Providence	State RI	Zip Code 02909	Category/ Type 001
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. Sanchez, Mercy, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.3343f</b> Amount of Each Disbursement this Period [REDACTED] 302.25	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 927.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Sanchez, Mercy, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33513</b> Amount of Each Disbursement this Period [REDACTED] 337.95	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sanchez, Mercy, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 21 Ford Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33562</b> Amount of Each Disbursement this Period [REDACTED] 202.50	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Santana, Maria, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 60 Netop Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33581</b> Amount of Each Disbursement this Period [REDACTED] 239.55	
City Providence	State RI	Zip Code 02907	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 780.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# 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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

Full Name (Last, First, Middle Initial)

**A. Schein, Michelle, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2018

Mailing Address 500 Old North Road

City South Kingston State RI Zip Code 02881

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33675**  
 Amount of Each Disbursement this Period  
 [ ] 1157.12

Purpose of Disbursement Net Wages

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Schwartzman, Jesse, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2018

Mailing Address 360 Oak Street

City Ridgewood State NJ Zip Code 07450

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33685**  
 Amount of Each Disbursement this Period  
 [ ] 1205.00

Purpose of Disbursement Net Wages

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. Shea, Dillon, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2018

Mailing Address 14 Harvest Street

City Providence State RI Zip Code 02908

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33465**  
 Amount of Each Disbursement this Period  
 [ ] 246.00

Purpose of Disbursement Canvass Stipend

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

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

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

[ ] 2608.12



**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 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Full Name (Last, First, Middle Initial)

**A. Shea, Dillon, , ,**

Mailing Address 14 Harvest Street

City  
Providence

State  
RI

Zip Code  
02908

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33496**  
 Amount of Each Disbursement this Period  
 [ ] 326.70

Memo Item

Full Name (Last, First, Middle Initial)

**B. Shea, Dillon, , ,**

Mailing Address 14 Harvest Street

City  
Providence

State  
RI

Zip Code  
02908

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33554**  
 Amount of Each Disbursement this Period  
 [ ] 278.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. Shell**

Mailing Address 1075 North Main Street

City  
Providence

State  
RI

Zip Code  
02904

Purpose of Disbursement  
Gas Cards

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB30B.33677**  
 Amount of Each Disbursement this Period  
 [ ] 1725.00

Memo Item

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

2329.95
---------

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. Spoken Hub LLC**

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement  
Dialing Minutes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33678**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Spoken Hub LLC**

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement  
Dialing Minutes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33858**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Spoken Hub LLC**

Mailing Address PO Box 615

City Manhasset State NY Zip Code 11030

Purpose of Disbursement  
Dialing Minutes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB30B.33678**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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 checked="" type="checkbox"/> 30b

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

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

**A. Sridhar, Keshavan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 290 Basil Avenue

City Morgan Hill State LA Zip Code 95037

Purpose of Disbursement Net Wages

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33680

Amount of Each Disbursement this Period: 1817.83

Memo Item

**B. Thomas, Jennifer, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 213 Medway St Apt 5A

City Providence State RI Zip Code 02906

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33714

Amount of Each Disbursement this Period: 318.89

Memo Item

**C. HealthSource RI**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 9711

City Providence State RI Zip Code 02940

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB30B.33714

Amount of Each Disbursement this Period: 318.89

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2136.72

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Thomas, Jennifer, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 213 Medway St Apt 5A		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33681</b> Amount of Each Disbursement this Period 2035.17	
City Providence	State RI	Zip Code 02906	Category/ Type
Purpose of Disbursement Net Wages			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. Valerio, Manuel, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 219A Early Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33509</b> Amount of Each Disbursement this Period 205.80	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. Valerio, Manuel, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 219A Early Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33566</b> Amount of Each Disbursement this Period 56.70	
City Providence	State RI	Zip Code 02907	Category/ Type
Purpose of Disbursement Canvass Stipend			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2297.67
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Valerio, Milagros, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33515</b> Amount of Each Disbursement this Period [REDACTED] 415.80	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Valerio, Milagros, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 84 Belmont Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33566</b> Amount of Each Disbursement this Period [REDACTED] 141.45	
City Cranston	State RI	Zip Code 02910	Category/ Type [REDACTED]
Purpose of Disbursement Canvass Stipend		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Vasquez, Annisha, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 342 Veazie Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB30B.33682</b> Amount of Each Disbursement this Period [REDACTED] 1205.00	
City Providence	State RI	Zip Code 02904	Category/ Type [REDACTED]
Purpose of Disbursement Net Wages		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1762.25
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. Wagnac, Josue, , ,**

Mailing Address 14 Eliot Avenue

City No Providence State RI Zip Code 02904

Purpose of Disbursement  
Net Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2018

FEC Identification Number

C  
Transaction ID : SB30B.33683  
Amount of Each Disbursement this Period  
633.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. Waithe, Justine, , ,**

Mailing Address 84 Belmont Road

City Cranston State RI Zip Code 02910

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2018

FEC Identification Number

C  
Transaction ID : SB30B.33508  
Amount of Each Disbursement this Period  
178.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Waithe, Justine, , ,**

Mailing Address 84 Belmont Road

City Cranston State RI Zip Code 02910

Purpose of Disbursement  
Canvass Stipend

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2018

FEC Identification Number

C  
Transaction ID : SB30B.33577  
Amount of Each Disbursement this Period  
23.70

Memo Item

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

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

835.52

**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 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 checked="" type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial) <b>A. Woischke, Alynn, , ,</b>		Date of Disbursement MM / DD / YYYY <b>10 / 15 / 2018</b>	
Mailing Address <b>57 Nicholas Brown Yard</b>		FEC Identification Number <b>C</b>	
City Providence	State RI	Zip Code 02904	<b>Transaction ID : SB30B.33684</b>
Purpose of Disbursement Net Wages		Category/ Type	Amount of Each Disbursement this Period <b>2852.54</b>
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>2852.54</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>165320.99</b>

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Rhode Island Democratic State Committee** Transaction ID : **SC/9.5183**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Licht 88 Committee			<input checked="" type="checkbox"/> Memo Item	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 MM / DD / YYYY 12 / 31 / 1988	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------------	-------------------------------	---

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

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	5249.87
<b>TOTALS</b> This Period (last page in this line only) .....	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 73 OF 114
	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 <b>WHITEHOUSE, SHELDON II, , ,</b>			Nature of Debt (Purpose): Coordinated expenditures overage
Mailing Address PO BOX 40280			
City PROVIDENCE	State RI	Zip Code 02940	

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	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	4.60
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	4.60
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	4.60

**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 MM / DD / YYYY 10 / 02 / 2018	TOTAL AMOUNT TRANSFERRED 29207.62
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	29207.62
<b>Transaction ID : H3.33856</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) <b>Total Amount Transferred For Direct Fundraising</b> .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) <b>Total Amount Transferred For Direct Candidate Support</b> .....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

**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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 05 / 2018	19621.32

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	19621.32
<b>Transaction ID : H3.33857</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

**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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RI Democratic Non-federal Account	MM / DD / YYYY 10 / 12 / 2018	1000.19

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1000.19
<b>Transaction ID : H3.33862</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support .....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	49829.13
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	49829.13

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Organizer. Transaction ID: H4.33624. Mailing Address: 1118 Howard Street, San Francisco, CA 94103. Purpose: Software. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 10/01/2018. Year-to-Date: 399851.16. Summary: FEDERAL SHARE 15.75, NONFEDERAL SHARE 59.25, TOTAL AMOUNT 75.00.

Form B: Amazon.com. Transaction ID: H4.33585. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 10/03/2018. Year-to-Date: 399941.76. Summary: FEDERAL SHARE 19.03, NONFEDERAL SHARE 71.57, TOTAL AMOUNT 90.60.

Form C: Amazon.com. Transaction ID: H4.33586. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Date: 10/04/2018. Year-to-Date: 402865.86. Summary: FEDERAL SHARE 614.07, NONFEDERAL SHARE 2310.03, TOTAL AMOUNT 2924.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 648.85, 2440.85, 3089.70.

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: (empty), (empty), (empty).

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33587</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Amazon.com Mailing Address 1516 Second Avenue			Allocated Activity or Event Year-To-Date 403065.88			
City Seattle	State WA	Zip Code 98144	Date: MM / DD / YYYY 10 / 04 / 2018			
Purpose of Disbursement: Committee Supplies		Category/ Type	Allocated Activity or Event Year-To-Date 403065.88			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 04 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
42.01			158.01			200.02

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33603</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Cox Communications Mailing Address PO Box 78000			Allocated Activity or Event Year-To-Date 403767.95			
City Detroit	State MI	Zip Code 48278	Date: MM / DD / YYYY 10 / 04 / 2018			
Purpose of Disbursement: Internet Cable Phones		Category/ Type	Allocated Activity or Event Year-To-Date 403767.95			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 04 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
147.44			554.63			702.07

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33604</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Cox Communications Mailing Address PO Box 78000			Allocated Activity or Event Year-To-Date 403835.03			
City Detroit	State MI	Zip Code 48278	Date: MM / DD / YYYY 10 / 04 / 2018			
Purpose of Disbursement: Internet		Category/ Type	Allocated Activity or Event Year-To-Date 403835.03			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 04 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
14.09			52.99			67.08

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.54		765.63		969.17

**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)

Rhode Island Democratic State Committee

Form A: Domino's Pizza. Transaction ID: H4.33611. Mailing Address: 845 North Main Street, Providence, RI 02906. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 403928.76. Date: 10/04/2018. Summary: FEDERAL SHARE 19.69, NONFEDERAL SHARE 74.04, TOTAL AMOUNT 93.73.

Form B: M.P. Cleaning Services. Transaction ID: H4.33621. Mailing Address: 60 Aberdeen Avenue, Warwick, RI 02888. Purpose: Office Maintenance. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 404148.76. Date: 10/04/2018. Summary: FEDERAL SHARE 46.20, NONFEDERAL SHARE 173.80, TOTAL AMOUNT 220.00.

Form C: Albaran, Orfilia, ., . Mailing Address: 50 Highland Street, Pawtucket, RI 02860. Purpose: Office Maintenance. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 404368.76. Date: 10/04/2018. Summary: FEDERAL SHARE 46.20, NONFEDERAL SHARE 173.80, TOTAL AMOUNT 220.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 112.09, NONFEDERAL SHARE 421.64, TOTAL AMOUNT 533.73.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33690</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Mohanty, Sulina, , , Mailing Address 45 Saw Mill Drive			Allocated Activity or Event Year-To-Date 404574.27			
City No Kingstown	State RI	Zip Code 02852	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Reimbursement		<input type="text"/>	Allocated Activity or Event Year-To-Date 404574.27			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="43.17"/>			<input type="text" value="162.34"/>			<input type="text" value="205.51"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33729</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Staples Mailing Address 551 North Main Street			Allocated Activity or Event Year-To-Date 0.00			
City Providence	State RI	Zip Code 02906	Date <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Meeting Printing		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="6.11"/>			<input type="text" value="22.94"/>			<input type="text" value="29.05"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33730</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Zorba's Pizza Mailing Address 1370 Mineral Spring Avenue			Allocated Activity or Event Year-To-Date 0.00			
City North Providence	State RI	Zip Code 02904	Date <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Meeting Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="37.06"/>			<input type="text" value="139.40"/>			<input type="text" value="176.46"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="43.17"/>		<input type="text" value="162.34"/>		<input type="text" value="205.51"/>

**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
<input type="text"/>	<input type="text"/>	<input type="text"/>



**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33746</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
52A Valley LLC Mailing Address 334 Broadway			Allocated Activity or Event Year-To-Date 406574.27			
City Providence	State RI	Zip Code 02909	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Rent		<input type="text"/>	Allocated Activity or Event Year-To-Date 406574.27			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="420.00"/>			<input type="text" value="1580.00"/>			<input type="text" value="2000.00"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33859</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Pizza Queen Mailing Address 895 Smith Street			Allocated Activity or Event Year-To-Date 406614.83			
City Providence	State RI	Zip Code 02908	Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Refreshments		<input type="text"/>	Allocated Activity or Event Year-To-Date 406614.83			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="8.52"/>			<input type="text" value="32.04"/>			<input type="text" value="40.56"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33588</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Amazon.com Mailing Address 1516 Second Avenue			Allocated Activity or Event Year-To-Date 406642.37			
City Seattle	State WA	Zip Code 98144	Date <input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 406642.37			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="5.79"/>			<input type="text" value="21.75"/>			<input type="text" value="27.54"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="434.31"/>		<input type="text" value="1633.79"/>		<input type="text" value="2068.10"/>

**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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Domino's Pizza. Transaction ID: H4.33612. Mailing Address: 845 North Main Street, Providence, RI 02906. Purpose: Committee Refreshments. Activity: Administrative. Date: 10/05/2018. Total Amount: 28.98.

Form B: Amazon.com. Transaction ID: H4.33589. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Date: 10/09/2018. Total Amount: 234.79.

Form C: Amazon.com. Transaction ID: H4.33590. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Date: 10/09/2018. Total Amount: 249.98.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 107.98, 405.77, 513.75.

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: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Amazon.com. Transaction ID: H4.33591. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 407188.31. Date: 10/09/2018. Summary: FEDERAL SHARE 6.76, NONFEDERAL SHARE 25.43, TOTAL AMOUNT 32.19.

Form B: Walmart. Transaction ID: H4.33693. Mailing Address: 551 Silver Spring Street, Providence, RI 02904. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 407354.72. Date: 10/09/2018. Summary: FEDERAL SHARE 34.95, NONFEDERAL SHARE 131.46, TOTAL AMOUNT 166.41.

Form C: Amazon.com. Transaction ID: H4.33861. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 407389.71. Date: 10/09/2018. Summary: FEDERAL SHARE 7.35, NONFEDERAL SHARE 27.64, TOTAL AMOUNT 34.99.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 49.06, 184.53, 233.59.

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: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33605</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Cox Communications Mailing Address PO Box 78000			Allocated Activity or Event Year-To-Date 407661.05			
City Detroit	State MI	Zip Code 48278	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Internet Cable Phones		<input type="text"/>	Allocated Activity or Event Year-To-Date 407661.05			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="56.99"/>			<input type="text" value="214.35"/>			<input type="text" value="271.34"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33694</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Lowe's Home Center Mailing Address 555 Greenwich Avenue			Allocated Activity or Event Year-To-Date 407901.33			
City Warwick	State RI	Zip Code 02886	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Committee Supplies		<input type="text"/>	Allocated Activity or Event Year-To-Date 407901.33			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="50.46"/>			<input type="text" value="189.82"/>			<input type="text" value="240.28"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33760</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Expedition Strategies Mailing Address 2010 N. Roosevelt Street			Allocated Activity or Event Year-To-Date 428361.33			
City Arlington	State VA	Zip Code 22205	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Issues Research		<input type="text"/>	Allocated Activity or Event Year-To-Date 428361.33			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="4296.60"/>			<input type="text" value="16163.40"/>			<input type="text" value="20460.00"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4404.05"/>		<input type="text" value="16567.57"/>		<input type="text" value="20971.62"/>

**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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Domino's Pizza. Transaction ID: H4.33613. Mailing Address: 845 North Main Street, Providence, RI 02906. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 428424.80. Date: 10/11/2018. Summary: FEDERAL SHARE 13.33, NONFEDERAL SHARE 50.14, TOTAL AMOUNT 63.47.

Form B: Staples. Transaction ID: H4.33632. Mailing Address: 551 North Main Street, Providence, RI 02906. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 429038.68. Date: 10/11/2018. Summary: FEDERAL SHARE 128.92, NONFEDERAL SHARE 484.96, TOTAL AMOUNT 613.88.

Form C: The Sandwich Hut. Transaction ID: H4.33633. Mailing Address: 1253 North Main Street, Providence, RI 02904. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 429241.72. Date: 10/11/2018. Summary: FEDERAL SHARE 42.64, NONFEDERAL SHARE 160.40, TOTAL AMOUNT 203.04.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 184.89, NONFEDERAL SHARE 695.50, TOTAL AMOUNT 880.39.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33635**  Memo Item

**Southwest Airlines**

Mailing Address Theodore Francis Green Airport

City Warwick State RI Zip Code 02886

Purpose of Disbursement: Airfare

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: 429885.52

Date: 10 / 11 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.20		508.60		643.80

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33636**  Memo Item

**Southwest Airlines**

Mailing Address Theodore Francis Green Airport

City Warwick State RI Zip Code 02886

Purpose of Disbursement: Airfare

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: 430529.32

Date: 10 / 11 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.20		508.60		643.80

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33600**  Memo Item

**Antonio's Newport**

Mailing Address 150 Connell Highway

City Newport State RI Zip Code 02840

Purpose of Disbursement: Committee Refreshments

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: 430560.78

Date: 10 / 12 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.61		24.85		31.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.01		1042.05		1319.06

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)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33602
Clinton Street Partners
Mailing Address PO Box 2516
City Fall River State MA Zip Code 02722
Purpose of Disbursement: Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 431960.78
Date 10 / 12 / 2018
FEDERAL SHARE 294.00 + NONFEDERAL SHARE 1106.00 = TOTAL AMOUNT 1400.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33606
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet Cable Phones
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 432890.94
Date 10 / 12 / 2018
FEDERAL SHARE 195.34 + NONFEDERAL SHARE 734.82 = TOTAL AMOUNT 930.16

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33607
Cox Communications
Mailing Address PO Box 78000
City Detroit State MI Zip Code 48278
Purpose of Disbursement: Internet Cable Phones
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 433162.28
Date 10 / 12 / 2018
FEDERAL SHARE 56.99 + NONFEDERAL SHARE 214.35 = TOTAL AMOUNT 271.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 546.33, 2055.17, 2601.50

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: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Della Rosa, Susann, , , Transaction ID: H4.33608. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: Democracy Live Transaction ID: H4.33609. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: Domino's Pizza Transaction ID: H4.33614. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (913.93), NONFEDERAL SHARE (3438.11), and TOTAL AMOUNT (4352.04).

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

Summary table for TOTAL This Period showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: HealthSource RI. Transaction ID: H4.33616. Mailing Address: PO Box 9711, Providence, RI 02940. Purpose: Health Insurance. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 437997.77. Date: 10/12/2018. Summary: FEDERAL SHARE 101.53, NONFEDERAL SHARE 381.92, TOTAL AMOUNT 483.45.

Form B: Lehigh Realty. Transaction ID: H4.33619. Mailing Address: One Realty Way, East Providence, RI 02914. Purpose: Rent and CAM. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 439283.10. Date: 10/12/2018. Summary: FEDERAL SHARE 269.92, NONFEDERAL SHARE 1015.41, TOTAL AMOUNT 1285.33.

Form C: Lehigh Realty. Transaction ID: H4.33620. Mailing Address: One Realty Way, East Providence, RI 02914. Purpose: Utilities. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 439414.26. Date: 10/12/2018. Summary: FEDERAL SHARE 27.55, NONFEDERAL SHARE 103.61, TOTAL AMOUNT 131.16.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 399.00, NONFEDERAL SHARE 1500.94, TOTAL AMOUNT 1899.94.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33623</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Moore, Leslie, , , Mailing Address 250 Main Street			Allocated Activity or Event Year-To-Date 440464.26			
City Pawtucket	State RI	Zip Code 02860	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Rent			Allocated Activity or Event Year-To-Date 440464.26			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
220.50			829.50			1050.00

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33627</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
RICOH USA, Inc. Mailing Address Five Dedrick Place			Allocated Activity or Event Year-To-Date 441426.75			
City West Caldwell	State NJ	Zip Code 07006	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Copier Maintenance			Allocated Activity or Event Year-To-Date 441426.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
202.13			760.36			962.49

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33634</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
The Sandwich Hut Mailing Address 1253 North Main Street			Allocated Activity or Event Year-To-Date 441446.75			
City Providence	State RI	Zip Code 02904	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Committee Refreshments			Allocated Activity or Event Year-To-Date 441446.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
4.20			15.80			20.00

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.83		1605.66		2032.49

**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)

**Rhode Island Democratic State Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33638</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
WRP Enterprises Mailing Address 221 Third Street			Allocated Activity or Event Year-To-Date 442296.75			
City Newport	State RI	Zip Code 02840	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Rent		Category/ Type	Allocated Activity or Event Year-To-Date 442296.75			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
178.50			671.50			850.00

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33695</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Grande, Andrew, , , Mailing Address PO Box 3731			Allocated Activity or Event Year-To-Date 442332.11			
City Cranston	State RI	Zip Code 02910	Date: MM / DD / YYYY 10 / 12 / 2018			
Purpose of Disbursement: Reimbursement		Category/ Type	Allocated Activity or Event Year-To-Date 442332.11			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 12 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
7.43			27.93			35.36

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33702</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Stop & Shop Mailing Address 575 Greenwich Avenue			Allocated Activity or Event Year-To-Date 0.00			
City Warwick	State RI	Zip Code 02886	Date: MM / DD / YYYY 10 / 04 / 2018			
Purpose of Disbursement: Committee Refreshments		Category/ Type	Allocated Activity or Event Year-To-Date 0.00			
Activity or Event Identifier: Administrative			Date: MM / DD / YYYY 10 / 04 / 2018			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
7.43			27.93			35.36

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.93		699.43		885.36

**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)

Rhode Island Democratic State Committee

**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33696**  Memo Item

**Bramblet, Sarah, , ,**

Mailing Address 16 Anthony Street

City Johnston State RI Zip Code 02919

Purpose of Disbursement: Reimbursement

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: 442358.55

Date: 10 / 12 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.56		20.88		26.44

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33703**  Memo Item

**Dunkin Donuts**

Mailing Address 27 Jefferson Boulevard

City Warwick State RI Zip Code 02888

Purpose of Disbursement: Committee Refreshments

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: 0.00

Date: 08 / 25 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.56		20.88		26.44

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33697**  Memo Item

**Thomas, Jennifer, , ,**

Mailing Address 213 Medway St Apt 5A

City Providence State RI Zip Code 02906

Purpose of Disbursement: Reimbursement

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: 442406.06

Date: 10 / 12 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.98		37.53		47.51

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.54		58.41		73.95

**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) Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33705 Stop & Shop Mailing Address 333 West River City Providence State RI Zip Code 02904 Purpose of Disbursement: Committee Refreshments Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative 10/02/2018 FEDERAL SHARE 9.98 NONFEDERAL SHARE 37.53 TOTAL AMOUNT 47.51

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33698 Fellini Pizza Mailing Address 2190 Broad Street City Cranston State RI Zip Code 02905 Purpose of Disbursement: Committee Refreshments Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative 10/12/2018 FEDERAL SHARE 5.21 NONFEDERAL SHARE 19.58 TOTAL AMOUNT 24.79

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33699 Dunkin Donuts Mailing Address 1245 North Main Street City Providence State RI Zip Code 02906 Purpose of Disbursement: Committee Refreshments Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative 10/12/2018 FEDERAL SHARE 31.92 NONFEDERAL SHARE 120.04 TOTAL AMOUNT 151.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE 37.13 NONFEDERAL SHARE 139.62 TOTAL AMOUNT 176.75

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)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33757
CitiBusiness Card
Mailing Address PO Box 182564
City Columbus State OH Zip Code 43210
Purpose of Disbursement: Credit Card Payment
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 443468.91
Date 10 / 12 / 2018
FEDERAL SHARE 186.09 + NONFEDERAL SHARE 700.01 = TOTAL AMOUNT 886.10

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33766
Longhorn Steakhouse
Mailing Address 400 Bald Hill Road
City Warwick State RI Zip Code 02886
Purpose of Disbursement: Meals
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 0.00
Date 09 / 08 / 2018
FEDERAL SHARE 8.40 + NONFEDERAL SHARE 31.60 = TOTAL AMOUNT 40.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33767
Longhorn Steakhouse
Mailing Address 400 Bald Hill Road
City Warwick State RI Zip Code 02886
Purpose of Disbursement: Meals
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 0.00
Date 09 / 11 / 2018
FEDERAL SHARE 13.02 + NONFEDERAL SHARE 48.98 = TOTAL AMOUNT 62.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 186.09, 700.01, 886.10

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: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: 1149 Restaurant. Transaction ID: H4.33768. Memo Item. Allocated Activity or Event: Administrative. Date: 09/12/2018. Total Amount: 56.00.

Form B: Chelo's of Warwick. Transaction ID: H4.33769. Memo Item. Allocated Activity or Event: Administrative. Date: 09/20/2018. Total Amount: 35.00.

Form C: Spain Restaurant. Transaction ID: H4.33770. Memo Item. Allocated Activity or Event: Administrative. Date: 09/27/2018. Total Amount: 311.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 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)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Exeter Country Club. Transaction ID: H4.33771. Memo Item. Allocated Activity or Event: Administrative. Date: 09/08/2018. Total Amount: 10.00.

Form B: Safehouse. Transaction ID: H4.33773. Memo Item. Allocated Activity or Event: Administrative. Date: 09/13/2018. Total Amount: 65.00.

Form C: Public Kitchen. Transaction ID: H4.33775. Memo Item. Allocated Activity or Event: Administrative. Date: 09/26/2018. Total Amount: 180.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 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)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.33778 Kay's. Mailing Address 1013 Cass Avenue. City Woonsocket, State RI, Zip Code 02895. Purpose of Disbursement: Meals. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 09/24/2018. FEDERAL SHARE 5.25, NONFEDERAL SHARE 19.75, TOTAL AMOUNT 25.00.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.33780 TST at The Deck. Mailing Address 1 Waites Wharf. City Newport, State RI, Zip Code 02840. Purpose of Disbursement: Meals. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 09/29/2018. FEDERAL SHARE 21.42, NONFEDERAL SHARE 80.58, TOTAL AMOUNT 102.00.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.33622 M.P. Cleaning Services. Mailing Address 60 Aberdeen Avenue. City Warwick, State RI, Zip Code 02888. Purpose of Disbursement: Office Maintenance. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 10/14/2018. FEDERAL SHARE 46.20, NONFEDERAL SHARE 173.80, TOTAL AMOUNT 220.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 46.20, 173.80, 220.00.

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: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33625</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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		
Postmaster Mailing Address Turnkey Station			Allocated Activity or Event Year-To-Date 443738.91		
City Providence	State RI	Zip Code 02940	Date: MM / DD / YYYY 10 / 14 / 2018		
Purpose of Disbursement: Committee Postage			Category/Type		
Activity or Event Identifier: Administrative			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
FEDERAL SHARE 10.50		NONFEDERAL SHARE 39.50		TOTAL AMOUNT 50.00	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33700</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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		
Sharpley, Lillian, , , Mailing Address 9819 South Blvd			Allocated Activity or Event Year-To-Date 443866.02		
City Cleveland	State OH	Zip Code 44108	Date: MM / DD / YYYY 10 / 14 / 2018		
Purpose of Disbursement: Reimbursement			Category/Type		
Activity or Event Identifier: Administrative			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
FEDERAL SHARE 26.70		NONFEDERAL SHARE 100.41		TOTAL AMOUNT 127.11	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33706</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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		
Stop & Shop Mailing Address 333 West River			Allocated Activity or Event Year-To-Date 0.00		
City Providence	State RI	Zip Code 02904	Date: MM / DD / YYYY 10 / 10 / 2018		
Purpose of Disbursement: Committee Refreshments			Category/Type		
Activity or Event Identifier: Administrative			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
FEDERAL SHARE 15.63		NONFEDERAL SHARE 58.78		TOTAL AMOUNT 74.41	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.20		139.91		177.11

**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)

Rhode Island Democratic State Committee

Form A: Home Depot, Transaction ID: H4.33707. Allocated Activity: Administrative. Date: 10/04/2018. Total Amount: 37.94.

Form B: Home Depot, Transaction ID: H4.33708. Allocated Activity: Administrative. Date: 10/10/2018. Total Amount: 14.76.

Form C: Sacks, Joseph, , , Transaction ID: H4.33701. Allocated Activity: Administrative. Date: 10/14/2018. Total Amount: 81.14.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 17.05, 64.09, 81.14.

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: 17.05, 64.09, 81.14.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Sacks, Joseph, , , Transaction ID: H4.33709. Includes fields for Mailing Address (15 Woodhaven Road), City (Barrington), State (RI), Zip Code (02806), Purpose of Disbursement (Mileage), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 12.18, NONFEDERAL SHARE 45.78, TOTAL AMOUNT 57.96.

Form B: Stop & Shop Transaction ID: H4.33710. Includes fields for Mailing Address (333 West River), City (Providence), State (RI), Zip Code (02904), Purpose of Disbursement (Committee Refreshments), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 2.69, NONFEDERAL SHARE 10.11, TOTAL AMOUNT 12.80.

Form C: RI Bridge & Turnpike Authority Transaction ID: H4.33711. Includes fields for Mailing Address (East Shore Road), City (Jamestown), State (RI), Zip Code (02835), Purpose of Disbursement (Toll), Activity or Event Identifier (Administrative), and Allocated Activity or Event (Administrative). Totals: FEDERAL SHARE 0.84, NONFEDERAL SHARE 3.16, TOTAL AMOUNT 4.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 0.00, NONFEDERAL SHARE 0.00, TOTAL AMOUNT 0.00.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33712**  Memo Item

**7-Eleven**

Mailing Address 270 Broad Street

City Providence State RI Zip Code 02903

Purpose of Disbursement: Committee Refreshments

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: 0.00

Date: 09 / 11 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.34		5.04		6.38

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33592**  Memo Item

**Amazon.com**

Mailing Address 1516 Second Avenue

City Seattle State WA Zip Code 98144

Purpose of Disbursement: Committee 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: 444022.04

Date: 10 / 15 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.73		59.15		74.88

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33601**  Memo Item

**BJ's Wholesale Club**

Mailing Address 200 Stonehill Drive

City Johnston State RI Zip Code 02919

Purpose of Disbursement: Committee 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: 444079.03

Date: 10 / 15 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.97		45.02		56.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.70		104.17		131.87

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)
Rhode Island Democratic State Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33610
Division of Taxation
Mailing Address One Capitol Hill
City Providence State RI Zip Code 02908
Purpose of Disbursement: State Payroll Taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 444579.89
Date 10 / 15 / 2018
FEDERAL SHARE 105.19 + NONFEDERAL SHARE 395.67 = TOTAL AMOUNT 500.86

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33615
Dougherty, Elizabeth, , ,
Mailing Address PO Box 113
City Livingston State NY Zip Code 12541
Purpose of Disbursement: Net Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 445737.01
Date 10 / 15 / 2018
FEDERAL SHARE 243.00 + NONFEDERAL SHARE 914.12 = TOTAL AMOUNT 1157.12

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33617
Internal Revenue Service
Mailing Address PO Box 660351
City Dallas State TX Zip Code 75266
Purpose of Disbursement: Federal Payroll Taxes
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 453227.06
Date 10 / 15 / 2018
FEDERAL SHARE 1572.92 + NONFEDERAL SHARE 5917.13 = TOTAL AMOUNT 7490.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1921.11, 7226.92, 9148.03

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

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Rhode Island Democratic State Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33618</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Juliano, Evan, , , Mailing Address 27 Sixth Avenue			Allocated Activity or Event Year-To-Date 454540.66			
City Pelham	State NY	Zip Code 10803	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Net Wages		<input type="text"/>	Allocated Activity or Event Year-To-Date 454540.66			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="275.86"/>			<input type="text" value="1037.74"/>			<input type="text" value="1313.60"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33626</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Ramstad Albert, Kathryn, , , Mailing Address 30A Jenckes Street			Allocated Activity or Event Year-To-Date 455659.78			
City Providence	State RI	Zip Code 02903	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Net Wages		<input type="text"/>	Allocated Activity or Event Year-To-Date 455659.78			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="235.02"/>			<input type="text" value="884.10"/>			<input type="text" value="1119.12"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33628</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Sacks, Joseph, , , Mailing Address 15 Woodhaven Road			Allocated Activity or Event Year-To-Date 456973.38			
City Barrington	State RI	Zip Code 02806	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: Net Wages		<input type="text"/>	Allocated Activity or Event Year-To-Date 456973.38			
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="275.86"/>			<input type="text" value="1037.74"/>			<input type="text" value="1313.60"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
786.74		2959.58		3746.32

**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)

**Rhode Island Democratic State Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33629</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Samsel, Emily, , , Mailing Address 25 Holden Street			Allocated Activity or Event Year-To-Date 458949.44			
City Providence	State RI	Zip Code 02908	Date: MM / DD / YYYY 10 / 15 / 2018			
Purpose of Disbursement: Net Wages			Category/ Type			
Activity or Event Identifier: <b>Administrative</b>						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
414.98			1561.08			1976.06

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33630</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Sharpley, Lillian, , , Mailing Address 9819 South Blvd			Allocated Activity or Event Year-To-Date 460550.75			
City Cleveland	State OH	Zip Code 44108	Date: MM / DD / YYYY 10 / 15 / 2018			
Purpose of Disbursement: Net Wages			Category/ Type			
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
336.28			1265.03			1601.31

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33631</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
Slator, Isabel, , , Mailing Address 55 Bradford Street Apt 204			Allocated Activity or Event Year-To-Date 462398.40			
City Providence	State RI	Zip Code 02903	Date: MM / DD / YYYY 10 / 15 / 2018			
Purpose of Disbursement: Net Wages			Category/ Type			
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
388.01			1459.64			1847.65

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1139.27		4285.75		5425.02

**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)

Rhode Island Democratic State Committee

Form A: The Sandwich Hut. Transaction ID: H4.33639. Mailing Address: 1253 North Main Street, Providence, RI 02904. Purpose: Committee Refreshments. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 462499.06. Date: 10/15/2018. Summary: FEDERAL SHARE 21.14 + NONFEDERAL SHARE 79.52 = TOTAL AMOUNT 100.66

Form B: Albaran, Orfilia, , . Transaction ID: H4.33721. Mailing Address: 50 Highland Street, Pawtucket, RI 02860. Purpose: Office Maintenance. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 462589.06. Date: 10/15/2018. Summary: FEDERAL SHARE 18.90 + NONFEDERAL SHARE 71.10 = TOTAL AMOUNT 90.00

Form C: Amazon.com. Transaction ID: H4.33593. Mailing Address: 1516 Second Avenue, Seattle, WA 98144. Purpose: Committee Supplies. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 463119.19. Date: 10/16/2018. Summary: FEDERAL SHARE 111.33 + NONFEDERAL SHARE 418.80 = TOTAL AMOUNT 530.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 151.37, 569.42, 720.79

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: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Amazon.com, Transaction ID: H4.33594. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Amazon.com, Transaction ID: H4.33595. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Amazon.com, Transaction ID: H4.33596. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for Subtotal: FEDERAL SHARE 169.34, NONFEDERAL SHARE 637.02, TOTAL AMOUNT 806.36

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

Summary table for Total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

Form A: Amazon.com, Transaction ID: H4.33597. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 130.06, NONFEDERAL SHARE 489.26, TOTAL AMOUNT 619.32.

Form B: Amazon.com, Transaction ID: H4.33598. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 1.79, NONFEDERAL SHARE 6.70, TOTAL AMOUNT 8.49.

Form C: Amazon.com, Transaction ID: H4.33599. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details. Totals: FEDERAL SHARE 11.32, NONFEDERAL SHARE 42.56, TOTAL AMOUNT 53.88.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 143.17, 538.52, 681.69.

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 are empty.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Rhode Island Democratic State Committee

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33637**  Memo Item

**Wayland Bakery**

Mailing Address 136 Wayland Avenue

City Providence State RI Zip Code 02906

Purpose of Disbursement: Meeting Refreshments

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: 464693.24

Date: 10 / 16 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.06		67.94		86.00

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.33640**  Memo Item

**The Tuesday Company**

Mailing Address 812 Lawrence Street

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement: Software

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: 467243.24

Date: 10 / 16 / 2018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.50		2014.50		2550.00

**C.** Full Name (Last, First, Middle Initial)  Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

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:

Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
553.56		2082.44		2636.00

**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
14168.44		53298.64		67467.08

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

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

NAME OF ACCOUNT Levin Account	DATE OF RECEIPT MM / DD / YYYY 10 / 12 / 2018	TOTAL AMOUNT TRANSFERRED 48813.08
----------------------------------	---	--------------------------------------

BREAKDOWN OF THIS TRANSFER		Transaction ID : H5.33854
i) <b>Voter Registration</b>		
Total Amount Transferred for Voter Registration.....	VOTER REGISTRATION	0.00
ii) <b>Voter ID</b>		
Total Amount Transferred for Voter ID .....	VOTER ID	0.00
iii) <b>GOTV</b>		
Total Amount Transferred for GOTV .....	GOTV	48813.08
iv) <b>Generic Campaign Activity</b>		
Total Amount Transferred for Generic Campaign Activity .....	GENERIC CAMPAIGN ACTIVITY	0.00

NAME OF ACCOUNT	DATE OF RECEIPT MM / DD / YYYY	TOTAL AMOUNT TRANSFERRED
-----------------	-----------------------------------	--------------------------

BREAKDOWN OF THIS TRANSFER	
i) <b>Voter Registration</b>	
Total Amount Transferred for Voter Registration.....	VOTER REGISTRATION
ii) <b>Voter ID</b>	
Total Amount Transferred for Voter ID .....	VOTER ID
iii) <b>GOTV</b>	
Total Amount Transferred for GOTV .....	GOTV
iv) <b>Generic Campaign Activity</b>	
Total Amount Transferred for Generic Campaign Activity .....	GENERIC CAMPAIGN ACTIVITY

<b>TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)</b>	
TOTAL This Period (Voter Registration).....	0.00
TOTAL This Period (Voter ID) .....	0.00
TOTAL This Period (GOTV).....	48813.08
TOTAL This Period (Generic Campaign Activity).....	0.00
TOTAL This Period (Total Amount of Transfers Received).....	48813.08

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

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

A. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item <b>Rising Tide Interactive</b>				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
<b>Transaction ID : H6.33725</b>				Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">92137.84</div>	
Mailing Address 901 New York Avenue NW					
City Washington	State DC	Zip Code 20001	<input type="text"/>	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2018"/>	
Purpose of Disbursement Generic Digital Voter Education				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>

B. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address					
City	State	Zip Code	<input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Disbursement				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;"></div>			<div style="border: 1px solid black; padding: 2px;"></div>		<div style="border: 1px solid black; padding: 2px;"></div>

C. Full Name (Last, First, Middle Initial) / Full Organization Name <input type="checkbox"/> Memo Item				Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address					
City	State	Zip Code	<input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Disbursement				Category/ Type	
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;"></div>			<div style="border: 1px solid black; padding: 2px;"></div>		<div style="border: 1px solid black; padding: 2px;"></div>

<b>SUBTOTAL</b> of Shared Federal and Levin Activity This Page					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>
<b>TOTAL</b> This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))					
FEDERAL SHARE			LEVIN SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">12975.63</div>			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		<div style="border: 1px solid black; padding: 2px;">61788.71</div>
<b>TOTAL</b> This Period for the Levin Share					
			<div style="border: 1px solid black; padding: 2px;">48813.08</div>		

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SL.33863

NAME OF COMMITTEE (In Full) Rhode Island Democratic State Committee		
NAME OF ACCOUNT Levin Account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized ..... (Use Schedule L-A)	52000.00	110500.00
(b) Unitemized .....	0.00	0.00
(c) Total .....	52000.00	110500.00
2. OTHER RECEIPTS .....	0.00	0.00
3. TOTAL RECEIPTS .....	52000.00	110500.00
(Add Lines 1c and 2)		
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration .....	0.00	0.00
(b) Voter ID .....	0.00	0.00
(c) GOTV .....	48813.08	107631.34
(d) Generic Campaign .....	0.00	0.00
(e) Total .....	48813.08	107631.34
5. OTHER DISBURSEMENTS .....	0.00	0.00
6. TOTAL DISBURSEMENTS .....	48813.08	107631.34
(Add Lines 4e and 5)		
7. BEGINNING CASH ON HAND .....	310.84	629.10
(for Column B, use cash as of January 1st)		
8. RECEIPTS .....	52000.00	110500.00
(from Line 3)		
9. SUBTOTAL .....	52310.84	111129.10
(Add Lines 7 and 8)		
10. DISBURSEMENTS .....	48813.08	107631.34
(From Line 6)		
11. ENDING CASH ON HAND .....	3497.76	3497.76
(Subtract Line 10 From Line 9)		

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  1a  2  
(check only one)

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**

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

**A. Bloomberg, Michael, , ,**

Account : 8659

Mailing Address 17 E 79th Street

City New York State NY Zip Code 10022

Name of Employer (for Individual) Bloomberg LP

Occupation (for Individual) Executive

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33867

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

10000.00

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

**B. Fisher, Robert, , ,**

Account : 8659

Mailing Address 1 Maritime Plaza

City San Francisco State CA Zip Code 94111

Name of Employer (for Individual) Pisces Inc

Occupation (for Individual) Managing Director

Date of Receipt

04 / 20 / 2018

Transaction ID : SASL1A.33868

Amount of Each Receipt this Period

5000.00

Aggregate Year-to-Date

6000.00

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

**C. Mandell, Mark, , ,**

Account : 8659

Mailing Address One Park Row

City Providence State RI Zip Code 02903

Name of Employer (for Individual) Self-Employed

Occupation (for Individual) Attorney

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33866

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

10000.00

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

**D. Schusterman, Lynn, , ,**

Account : 8659

Mailing Address PO Box 699

City Tulsa State OK Zip Code 74101

Name of Employer (for Individual) Retired

Occupation (for Individual) Retired

Date of Receipt

04 / 12 / 2018

Transaction ID : SASL1A.33864

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

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

34000.00

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



**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  
(check only one)  1a  2

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**

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

**A. Schusterman, Stacy, , ,**

Account : 8659

Mailing Address 2441 E 49th Street

City  
Tulsa

State  
OK

Zip Code  
74119

Name of Employer (for Individual)  
Samson Energy Co

Occupation (for Individual) Chief Executive Officer

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2018

Transaction ID : SASL1A.33865

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

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

**B. Townsend, Allison, , ,**

Account : 8659

Mailing Address 63 Alfred Stone Road

City  
Barrington

State  
RI

Zip Code  
02806

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual) Not Employed

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2018

Transaction ID : SASL1A.33869

Amount of Each Receipt this Period

9000.00

Aggregate Year-to-Date

10000.00

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

**C.**

Account :

Mailing Address

City

State

Zip Code

Name of Employer (for Individual)

Occupation (for Individual)

Date of Receipt

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

Amount of Each Receipt this Period

Aggregate Year-to-Date

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

**D.**

Account :

Mailing Address

City

State

Zip Code

Name of Employer (for Individual)

Occupation (for Individual)

Date of Receipt

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

Amount of Each Receipt this Period

Aggregate Year-to-Date

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

18000.00

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

52000.00

**SCHEDULE L-B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**  
**OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 114 OF 114  
(check only one)  4a  4c  5  
 4b  4d

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**

Full Name (Last, First, Middle Initial) / Full Organization Name  Memo Item  
**A. Rhode Island Democratic State Committee**

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 12 / 2018

Transaction ID : **SBSL4C.33870**

Amount of Each Disbursement this Period  
48813.08

Account : 8659

Mailing Address P.O. Box 6004

City Providence State RI Zip Code 02940

Purpose of Disbursement  
Levin Transfer

Full Name (Last, First, Middle Initial) / Full Organization Name  Memo Item  
**B.**

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Mailing Address

City State Zip Code

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name  Memo Item  
**C.**

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Mailing Address

City State Zip Code

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name  Memo Item  
**D.**

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Mailing Address

City State Zip Code

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name  Memo Item  
**E.**

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Mailing Address

City State Zip Code

Purpose of Disbursement

48813.08

48813.08

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

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