

**State of Rhode Island and Providence Plantations**

**Board of Elections**

Campaign Finance Division

50 Branch Avenue, Providence, Rhode Island 02904

Tel. (401)222-2345 Fax (401)222-4424

www.elections.state.ri.us

**SUMMARY OF CAMPAIGN ACTIVITY**

Name of Candidate, Political Party, Political Action Committee	Key#
DANIEL J MCKEE	2235

Street Address	City/Town, State and Zip Code
12 HILLSIDE ROAD	CUMBERLAND, RI 02864

Mailing Address (if different)	City/Town, State and Zip Code
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Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 335-3414			NSPELL11@HOTMAIL.COM

If Candidate Office Sought:	Party Affiliation if any:
Lieutenant Governor	Democratic

Reporting Period (Dates):	Period Beginning: 08/15/2018	Period Ending: 09/04/2018
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**SUMMARY OF ACTIVITY FOR PERIOD**

1. Beginning Cash Balance	\$ 149,113.92
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	46,905.00
3. Political Parties	0
4. Political Action Committees	1,750.00
5. Loan Proceeds	0
6. Payroll Check off	0
7. Interest Received	0
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	(50.00)
14. Returned Checks	0
b. Other:	0
	0
	0
	0
3. Total Cash	197,718.92
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	162,923.36
c. Repayment of Loans	0
d. Account Payable Repayments	0
e. Other	0

4. Cash Disbursements, continued	
f. Other Disbursements	0
	0
	0
5. Ending Cash Balance	\$ 34,795.56

**CAMPAIGN FUND STATUS**

6. Report of In-Kind Contributions	0
7. Cash	\$ 34,795.56
8. Other Assets	0
	0
	0
9. Total Assets	\$ 34,795.56

**LIABILITIES AND FUND BALANCE**

10. Liabilities	
a. Accounts Payable	\$ 450.00
b. Loans Payable	35,000.00
c. Other Liabilities	0
	0
	0
11. Total Liabilities	35,450.00
12. Total Fund Balance	\$(654.44)
13. Total Liability / Fund Balance	34,795.56

I HEREBY CERTIFY THAT THIS REPORT OF CAMPAIGN  
CONTRIBUTIONS AND EXPENDITURES AND THE SUPPORTING  
DOCUMENTS ARE TRUE AND CORRECT.

\_\_\_\_\_  
Name of Person Filing Report

\_\_\_\_\_  
Title of Person Filing Report

\_\_\_\_\_  
Address of Person Filing This Report

X \_\_\_\_\_  
Signature of Person Date

\_\_\_\_\_  
SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_

Day of \_\_\_\_\_ 20 \_\_\_\_\_

X \_\_\_\_\_  
Notary Public

\_\_\_\_\_

**SCHEDULE OF CONTRIBUTIONS RECEIVED**

<b>Key #</b> 2,235	<b>Full Name of Candidate or Committee</b> DANIEL J MCKEE	<b>Reporting Period</b> <b>From: 08/15/2018 To: 09/04/2018</b>
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<b>Item</b>	<b>Transaction Type</b> Check	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 08/21/2018	<b>Deposit Date</b>	<b>Contribution Amount</b> 50.00
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**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia	L.	Acquaviva-Aubin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
12 Elna Dr					12 Elna Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield			RI	02917	Smithfield		RI	02917

<b>Item</b>	<b>Transaction Type</b> Check	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 08/21/2018	<b>Deposit Date</b>	<b>Contribution Amount</b> 25.00
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**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Rita	T	Afonso		Retired			
<b>Street Address</b>					<b>Street Address</b>			
51 Rawson Road					51 Rawson Road			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland		RI	02864

<b>Item</b>	<b>Transaction Type</b> Check	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 08/30/2018	<b>Deposit Date</b>	<b>Contribution Amount</b> 250.00
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**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Rita	T	Afonso		Retired			
<b>Street Address</b>					<b>Street Address</b>			
51 Rawson Road					51 Rawson Road			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland		RI	02864

<b>Item</b>	<b>Transaction Type</b> Check	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 08/16/2018	<b>Deposit Date</b>	<b>Contribution Amount</b> 150.00
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**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Francisco		Agonia		Agonia Bros. Construction, LLC			
<b>Street Address</b>					<b>Street Address</b>			
7 Brownehill Ct					7 Brownehill Ct			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/26/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Frederick	T.	Albert		Apollo Auto Sales			
<b>Street Address</b>					<b>Street Address</b>			
9 Hayfield Lane					630 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Edgar		Alger		EDGAR ALGER, CPA			
<b>Street Address</b>					<b>Street Address</b>			
17 Kings Row					519 Mendon Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Gary		Alger		Gary Alger Attorney at Law			
<b>Street Address</b>					<b>Street Address</b>			
76 Hillside Ave					519 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia		Alger		ER Alger & Company			
<b>Street Address</b>					<b>Street Address</b>			
80 Fisher Rd Unit 95					519 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		200.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph		Almond		Town of Lincoln			
<b>Street Address</b>					<b>Street Address</b>			
6 Brookside Dr					100 Old River Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Bruce		Altieri		Poppy's Restaurant		
<b>Street Address</b>					<b>Street Address</b>		
3 Norton Drive					3344 Mendon Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Alves		Keller Williams Leading Edge		
<b>Street Address</b>					<b>Street Address</b>		
35 Overhill Rd					2 Charles St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warren			RI	02885	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patricia	M	Anderson		Town of Charlestown		
<b>Street Address</b>					<b>Street Address</b>		
9 Lenox Ave					4540 South County Trail		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Warwick			RI	02893	Charlestown	RI	02813

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/24/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	D	Andreozzi		Retired		
<b>Street Address</b>					<b>Street Address</b>		
17 Twins Lane					17 Twins Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
N. Providence			RI	02904	North Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jose	J	Astacio		Self Employed Entrepreneur		
<b>Street Address</b>					<b>Street Address</b>		
64 Cromwell St F11					64 Cromwell St F11		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02907	Providence	RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Philip	A.	Ayoub		Ayoub Engineering Inc			
<b>Street Address</b>					<b>Street Address</b>			
414 Benefit St					414 Benefit St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Philip	A.	Ayoub		Ayoub Engineering Inc			
<b>Street Address</b>					<b>Street Address</b>			
414 Benefit St					414 Benefit St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/18/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Brian	A.	Azar		Santander Bank			
<b>Street Address</b>					<b>Street Address</b>			
4 Hill Farm Ln					One Financial Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Baird		Mike's Professional Tree Service			
<b>Street Address</b>					<b>Street Address</b>			
800 Gibson Hill Rd					17 Reservoir Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Greene					Coventry		RI	02816

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ruth	S	Bascombe		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
80 West Wrentham Rd					45 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	E.	Bastien		Davenport			
<b>Street Address</b>					<b>Street Address</b>			
P.O. Box 58					1070 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/15/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	James	S	Bennett		Prospect Medical Holdings, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
140 Boston Neck Rd					3415 South Sepulveda Blvd, 9th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Los Angeles		CA	90034

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		400.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	B.	Bentz		Property Advisory Group			
<b>Street Address</b>					<b>Street Address</b>			
1 Fair Oaks Court South					4 Cathedral Sq			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Greenville					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	H	Bernstein		Retired			
<b>Street Address</b>					<b>Street Address</b>			
36 Hill Court					36 Hill Court			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rumford					Rumford		RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/17/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	E	Bessette	Jr.	Residential Properties			
<b>Street Address</b>					<b>Street Address</b>			
20 Willcroft Street					1 Park view Place			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/17/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	T.	Biddick		The Allied Group			
<b>Street Address</b>					<b>Street Address</b>			
37 Columbia Lane					25 Amflex Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jamestown					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Robert	H.	Bolton		Retired			
<b>Street Address</b>					<b>Street Address</b>			
500 Mendon Rd, Unit 303					500 Mendon Rd, Unit 303			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donald	J.	Boyle		Jade Mfg.			
<b>Street Address</b>					<b>Street Address</b>			
60 Tamarack Dr					132 Meadow St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas	W.	Breckel		East Side Enterprises			
<b>Street Address</b>					<b>Street Address</b>			
105 Bishop Hill Rd					2050 Plainfield Pike			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Matthew		Cedor		IGT / GTECH			
<b>Street Address</b>					<b>Street Address</b>			
88 Countryside Drive					10 Memorial Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Gary	J.	Chelo		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
289 Robin Hollow Rd								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich			RI	02817-2132				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Glenn	B.	Chelo		Chelo's Management Group			
<b>Street Address</b>					<b>Street Address</b>			
5 Stone Ridge Dr					1725 Mendon Rd, Ste 209			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield			RI	02896-8179	Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jarod	C	Chelo		Chelo's Restaurants			
<b>Street Address</b>					<b>Street Address</b>			
5 Stone Ridge Dr					505 Silver Spring St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
N Smithfield			RI	02896	Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	M.	Chenevert		RIMA			
<b>Street Address</b>					<b>Street Address</b>			
1 Thomas Dr					25 Sharpe Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland			RI	02864-2907	Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		200.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Arthur	J.	Chianese		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2970 Mendon Road, Apt 32					2970 Mendon Road, Apt 32			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/31/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	J	Choquette	Jr.	Gilbane, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
57 Old Forge Road					7 Jackson Walkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		300.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Richard		Clark		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
3205 Post Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wakefield					RI			02879-7568

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Peter	D.	Conway		Conway Tours			
<b>Street Address</b>					<b>Street Address</b>			
15 Notre Dame Ave					10 Nate Whipple Hwy			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	B.	Crawford		Emergency Management Consulting Group LLC			
<b>Street Address</b>					<b>Street Address</b>			
22 Knollwood Dr					22 Knollwood Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Alan	F.	Crowe		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
1 Westgate Rd					45 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/30/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Davis		Dassault Systems			
<b>Street Address</b>					<b>Street Address</b>			
151 Douglas Pike					300 Centreville Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	T.	DeRoche		Greater Providence Chamber of Commerce			
<b>Street Address</b>					<b>Street Address</b>			
86A Nipmuc Trail					30 Exchange Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/16/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Bradford	S	Dimeo		Dimeo Construction Company			
<b>Street Address</b>					<b>Street Address</b>			
140 Nayatt Road					75 Chapman St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/16/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Kimberly	M.	Dimeo		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
140 Nyatt Rd					140 Nyatt Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Barrington		RI	02806

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Lorraine	S	Dimeo		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
75 Chapman St					75 Chapman St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	James	F.	DiNunzio		Retired			
<b>Street Address</b>					<b>Street Address</b>			
20 Cadoret Dr					20 Cadoret Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	William	L.	Distefano	Jr	The Omni Group			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 856					Water Tower Park, F, 1099 Jay St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Rochester		NY	14611

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Renee		Ducharme		Jungle Junction			
<b>Street Address</b>					<b>Street Address</b>			
1270 Mendon Rd					1270 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	E. Craig		Dwyer		Retired			
<b>Street Address</b>					<b>Street Address</b>			
500 Mendon Rd Unit 219					500 Mendon Rd Unit 219			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ibrahim	A.	Elgabry		Oceanstate Cardiovascular and Vein Center			
<b>Street Address</b>					<b>Street Address</b>			
1 Cobbles Way					191 Social St, Ste 100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hopkinton					Woonsocket		RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/24/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Mario		Fonseca		Mario Fonseca Pest Control Service			
<b>Street Address</b>					<b>Street Address</b>			
42 Meadow Crest Drive					444 Broad Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Central Falls		RI	01863

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	G	Formicola		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
118 Point Judith Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					RI			02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	G. Richard		Fossa		Town of North Providence			
<b>Street Address</b>					<b>Street Address</b>			
65 Bellevue Ave					2000 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					North Providence		RI	02911

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Gary	E	Furtado		Navigant Credit Union			
<b>Street Address</b>					<b>Street Address</b>			
15 Beth Ave					1005 Douglas Pike			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warren					Smithfield		RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		150.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jean		Gagnier		Fix-It Home Services			
<b>Street Address</b>					<b>Street Address</b>			
6 Narragansett Ave					6 Narragansett Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Westerly		RI	02891

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Deborah		Galvin		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
41 Bear Hill Rd					41 Bear Hill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Seekonk		MA	02771

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Edward	J	Galvin		Galvin & Associates			
<b>Street Address</b>					<b>Street Address</b>			
41 Bear Hill Road					One Park Row, 5th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jeffrey	T.	Gardner		Shellfish for You, LLC			
<b>Street Address</b>					<b>Street Address</b>			
227 Shore Rd					227 Shore Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Westerly		RI	02891

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Cynthia	L.	Gavin		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
62 Countryside Dr					62 Countryside Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864-2618

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	S.	Gendron		IGT / GTECH			
<b>Street Address</b>					<b>Street Address</b>			
50 Rock Way					10 Memorial Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Robert	D.	Goldberg		Goldberg Law Offices			
<b>Street Address</b>					<b>Street Address</b>			
226 Cottage St					226 Cottage St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Nicholas	J	Goodier		Kelly & Mancini, P.C.			
<b>Street Address</b>					<b>Street Address</b>			
10 Columbia Dr					128 Dorrance St, #300			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Barbara		Goodrich		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
402 Brookhaven LN					45 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woonsocket					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donald	R.	Grebien		City of Pawtucket			
<b>Street Address</b>					<b>Street Address</b>			
101 Vine St					145 Roosevelt Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Fred	J.	Guarino		Blum Shapiro			
<b>Street Address</b>					<b>Street Address</b>			
9 Harvest Rd					One Capital Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rehoboth					Cranston		RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Scott		Gunn		GTECH			
<b>Street Address</b>					<b>Street Address</b>			
130 Prospect St					10 Memorial Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	G.	Hanuschak		Hanuschak Insurance			
<b>Street Address</b>					<b>Street Address</b>			
306 Sneece Pond Rd					3288 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	THOMAS		HEFNER		TOWN OF CUMBERLAND			
<b>Street Address</b>					<b>Street Address</b>			
2970 Mendon Rd					45 BROAD STREET			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
CUMBERLAND					CUMBERLAND		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	THOMAS		HEFNER		TOWN OF CUMBERLAND			
<b>Street Address</b>					<b>Street Address</b>			
2970 Mendon Rd					45 BROAD STREET			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
CUMBERLAND					CUMBERLAND		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/31/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Barbara		Imondi		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
75 Oaklawn Avenue								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston							RI	02920



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia	A	Issa		Retired			
<b>Street Address</b>					<b>Street Address</b>			
16 Lilac St					16 Lilac St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Steven	J	Issa		Customers Bank			
<b>Street Address</b>					<b>Street Address</b>			
16 Lilac St					40 Westminister St, Ste 602			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Robert	B.	Jacquard		Law Office of Robert B. Jacquard, Esq.			
<b>Street Address</b>					<b>Street Address</b>			
34 Sagamore Rd					949 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	E.	Janczar		Retired			
<b>Street Address</b>					<b>Street Address</b>			
400 W Wrentham Rd					400 W Wrentham Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864-1016

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Eugene	J	Jeffers		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
P.O. Box 492					45 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Albion					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Carey	D	Jeffrey		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
9 Brayton Mdw					9 Brayton Mdw			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					East Greenwich		RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/21/2018		750.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Colin	P	Kane		Peregrine Group LLC			
<b>Street Address</b>					<b>Street Address</b>			
174 Wickford Point Rd					20 Newman Ave # 1105			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
N Kingstown					Rumford		RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas		Kane		Town of NP			
<b>Street Address</b>					<b>Street Address</b>			
76 Country Side Rd					2000 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					N. Providence		RI	02911

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/29/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Lisa		Kardon		Chrysler Dodge Ram			
<b>Street Address</b>					<b>Street Address</b>			
9 Stones Throw					1020 Belmont Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Plymouth					Brocton		MA	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/25/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ronald	P.	Kashmanian		Oceanstate Financial			
<b>Street Address</b>					<b>Street Address</b>			
83 Williams Rd					401 Wampanoag Trail, #100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield					Riverside		RI	02917-1410

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/16/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	F	Kawolis		Linder's Inc			
<b>Street Address</b>					<b>Street Address</b>			
95 W. Sutton Rd					211 Granite St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sutton					Worcester		MA	01607

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/25/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	M.	Kelly		Meeting Street School			
<b>Street Address</b>					<b>Street Address</b>			
21 Parkside Dr					1000 Eddy St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/29/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patrice	A	Kelly		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
8 Clydes Way					8 Clydes Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport					Westport		MA	02790

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph		Kishfy		Madison Investment			
<b>Street Address</b>					<b>Street Address</b>			
15 Paddock Dr					One Morning Star Court			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/15/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Chris		Klimecko		Rhode Island Dental Association			
<b>Street Address</b>					<b>Street Address</b>			
13114 Patriot Way					875 Centerville Road, #12			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Lynn	M	Kolek		RWMC			
<b>Street Address</b>					<b>Street Address</b>			
115 Beamis Ave					825 Chalkstone Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		150.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Phillip		Koutsogiane		Phillip Koutsogiane, Esq.			
<b>Street Address</b>					<b>Street Address</b>			
191 Social Street, Suite 800					191 Social Street, Suite 800			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woonsocket					Woonsocket		RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ernest		Labbe		Retired			
<b>Street Address</b>					<b>Street Address</b>			
12 Tanglewood Dr					12 Tanglewood Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donna	M	LaFlamme		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
4 Cathedral Sq					4 Cathedral Sq			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-3636

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Vincent	J.	Lamoriello		Tailor Made Products			
<b>Street Address</b>					<b>Street Address</b>			
1 Clauson Ct					205 Hallene Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	N.		MaureeLane		Retired			
<b>Street Address</b>					<b>Street Address</b>			
22 McGirr St.					22 McGirr St.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	BONNIE	A	LARGE		DIAMOND HILL APPRAISAL INC.			
<b>Street Address</b>					<b>Street Address</b>			
106 ABBOTT RUN VALLEY RD					106 ABBOTT RUN VALLEY RD			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
CUMBERLAND					CUMBERLAND		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/22/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Valerie		Large		Retired			
<b>Street Address</b>					<b>Street Address</b>			
25 Mayflower Dr					25 Mayflower Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/24/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ronald		Lariviere		Stateside Inc			
<b>Street Address</b>					<b>Street Address</b>			
40 Marlaine Dr					651 Cottage St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Pawtucket		RI	02861

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Brandon		Lemois		Community Covenant Church			
<b>Street Address</b>					<b>Street Address</b>			
20 Melody Ln					615 Tremont St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Rehoboth		MA	02769

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Bruce		Lemois		Eureka Vacuums			
<b>Street Address</b>					<b>Street Address</b>			
20 Melody Ln					P.O. Box 3900			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Peoria		IL	61612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Connie		Lemois		Community Covenant Church			
<b>Street Address</b>					<b>Street Address</b>			
20 Moldy Lane					615 Tremont St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Rehoboth		MA	02769

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Edwin		Lindsay		Retired			
<b>Street Address</b>					<b>Street Address</b>			
96 Desmarais St					96 Desmarais St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864-2044

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/18/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas	K.	Lopardo		Retired			
<b>Street Address</b>					<b>Street Address</b>			
7 Strawberry Lane					7 Strawberry Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Leonard		Lopes		The Victor Group, LLC			
<b>Street Address</b>					<b>Street Address</b>			
28 Bayley Street, Unit 501					One Park Row, 5th Floor			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	J.	Lucier		Lucier CPA, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
102 Cranberry Ter					1308 Atwood Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Johnston	RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patrick	C.	Lynch		The Patrick Lynch Group		
<b>Street Address</b>					<b>Street Address</b>		
320 Newport Ave					One Park Row, 5th Fl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Rocco		Macari		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
43 N Onley St							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919-5144			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Keith		Macksoud		Narra Bay Anesthesia		
<b>Street Address</b>					<b>Street Address</b>		
1817 Old Louisquisset Pike							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Douglas	W	Maiko		Self Employed Entrepreneur		
<b>Street Address</b>					<b>Street Address</b>		
165 Rome St					165 Rome St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pawtucket			RI	02860	Pawtucket	RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/20/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Earlene		Mara		Retired			
<b>Street Address</b>					<b>Street Address</b>			
130 Burgess Ave					130 Burgess Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861-3434

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/04/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Lucy		Mathieu		Retired			
<b>Street Address</b>					<b>Street Address</b>			
275 Wayland Ave					275 Wayland Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02906-4520

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/25/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Raymond	M.	Mathieu		Insure My Trip Services, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
275 Wayland Ave					100 Commerce Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Richard	M	McAuliffe		Mayforth Group			
<b>Street Address</b>					<b>Street Address</b>			
80 Fox Run					111 Wayland Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		75.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Francis	P.	McCabe		State of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
25 Nancy St.					82 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Providence		RI	02903



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/29/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Norman		McCulloch		Retired		
<b>Street Address</b>					<b>Street Address</b>		
99 Adams Point Rd					99 Adams Point Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Barrington	RI	02806

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		200.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Denise		McKee		Terrapin Group		
<b>Street Address</b>					<b>Street Address</b>		
370 Abbott Run Valley Rd					8 Davis St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/17/2018		200.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Mary	L	McKee		Retired		
<b>Street Address</b>					<b>Street Address</b>		
147 Windward Lane					147 Windward Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809	Bristol	RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Matthew		McKee		Infinity Group		
<b>Street Address</b>					<b>Street Address</b>		
111 Worth St Apt 11P					1407 Broadway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10013-4029	New York	NY	10018

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/24/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	James	N.	McLaughlin		State of Rhode Island, House of Representatives		
<b>Street Address</b>					<b>Street Address</b>		
15 Garden St					82 Smith St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Edward	A	McNulty		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10232 Heronwood Lane					10232 Heronwood Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Palm Beach			FL	33412	West Palm Beach	FL	33412

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael	P	Mello		IGT / GTECH		
<b>Street Address</b>					<b>Street Address</b>		
107 Woodlawn ve					10 Memorial Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Frank		Montanaro		State of RI		
<b>Street Address</b>					<b>Street Address</b>		
214 Locust Glen Dr					82 Smith St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI		Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
Dr.	Emilio		James Monti	Jr.	Retired		
<b>Street Address</b>					<b>Street Address</b>		
108 Thomas Leighton Blvd					108 Thomas Leighton Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul	P.	Moran		McLaughlin & Moran, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
460 Ocean Rd					40 Slater Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Terrence	P	Moran		McLaughlin & Moran, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
30 Freeman Pkwy					40 Slater Rd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Timothy	J.	Moran		Retired			
<b>Street Address</b>					<b>Street Address</b>			
750 Ocean Royal Way					750 Ocean Royal Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Juno Beach					Juno Beach		FL	33408

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Rich		Moreke		Retired			
<b>Street Address</b>					<b>Street Address</b>			
15 W Valley Dr					15 W Valley Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	T	Napolitano		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
96 Crest Dr								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/27/2018		150.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Robert	D	ONeil		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
36 Sleepy Hollow Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/31/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ralph	A.	Palumbo		Southern Sky Renewable Energy RI			
<b>Street Address</b>					<b>Street Address</b>			
79 Gilbert Stuart Dr					117 Metro Center Blvd., Suite 2007			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	R.	Paolino	Jr.	Paolino Properties			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 1576					100 Westminster St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		30.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Kathleen	A.	Partington		NE Institute of Technology			
<b>Street Address</b>					<b>Street Address</b>			
19 Alger Ave					2480 Post Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/27/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Kenneth		Paul		Achievement First			
<b>Street Address</b>					<b>Street Address</b>			
441 Erwin Street					403 James St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Trumbull					New Haven		CT	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Victor		Pedro		RI Integrated Medicine			
<b>Street Address</b>					<b>Street Address</b>			
105 Lenihan Ln					521 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/17/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Steven	J.	Peterson		Steven J. Peterson Law		
<b>Street Address</b>					<b>Street Address</b>		
17 Cross Rd					1536 Westminster St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919	Providence	RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	M.	Polisena		Town of Johnston		
<b>Street Address</b>					<b>Street Address</b>		
52 Lake Shore Drive					1385 Hartford Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919	Johnston	RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jeffrey	P	Polucha		Eastern Insurance		
<b>Street Address</b>					<b>Street Address</b>		
136 Fiske Ave					42 Weybosset		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Brooks		Porter		American Aqua Systems		
<b>Street Address</b>					<b>Street Address</b>		
31 Allen Ave					90 Dean Knauss Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879	Narragansett	RI	02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Teresa	M.	Reilly		CVS		
<b>Street Address</b>					<b>Street Address</b>		
55 Windsong Rd					1 CVS Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/18/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Rosemary	C.	Reilly-Chammat		RI Department of Education		
<b>Street Address</b>					<b>Street Address</b>		
9 Stagecoach Rd					255 Westminister St		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland		RI		02864	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Angelo		Ruo		East Side Enterprises		
<b>Street Address</b>					<b>Street Address</b>		
17 Heritage Dr					2050 Plainfield Pike		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln		RI		02865	Cranston	RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jerry	A.	Sahagian		Executive Realty		
<b>Street Address</b>					<b>Street Address</b>		
9 Wyndcliff Dr					118 Point Judith Rd		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saunderstown		RI		02874	Narragansett	RI	02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/15/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Frank		Salisbury		Best Practice Energy		
<b>Street Address</b>					<b>Street Address</b>		
16 Sandy Way					24 Salt Pond Road		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland		RI		02864	South Kingstown	RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Alfred		Santos		Retired		
<b>Street Address</b>					<b>Street Address</b>		
114 Thomas Leighton Blvd. South					114 Thomas Leighton Blvd. South		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland		RI		02864	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Maria	L	Santos		Hairworks Plus			
<b>Street Address</b>					<b>Street Address</b>			
271 Curran Rd					391 Mendon Rd Suite A			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/30/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	William		Schaufler		Retired			
<b>Street Address</b>					<b>Street Address</b>			
20 Brightman Way					20 Brightman Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Westerly		RI	02891

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Christopher	G	Shaban		IGT / GTECH			
<b>Street Address</b>					<b>Street Address</b>			
4 Grundy's Way					10 Memorial Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Mary Ann		Shallcross Smith		Dr. Daycare, Inc			
<b>Street Address</b>					<b>Street Address</b>			
6 Twin River Rd					203 Concord St, #301			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Daniel		Shedd		Taylor Box Co.			
<b>Street Address</b>					<b>Street Address</b>			
83 Rumstick Rd					293 Child St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Warren		RI	02885

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Karl	F	Sherry	Jr.	Hayes & Sherry Real Estate			
<b>Street Address</b>					<b>Street Address</b>			
30 Greenwood Ave					146 Westminster St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rumford					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Brian		Silvin		City of Warwick			
<b>Street Address</b>					<b>Street Address</b>			
79 Claypool Dr								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Edward	M.	Skwirz		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
32 Ridgeland Dr					45 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Denise		Solomon		Anthony Drug			
<b>Street Address</b>					<b>Street Address</b>			
174 Enfield Ave					219 Manton Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/28/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Spaziani		FM Global			
<b>Street Address</b>					<b>Street Address</b>			
16 Buckboard Dr					1175 Boston Providence Tpke			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Norwood		MA	02062



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	George	W.	Stansfield	III	Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
32 Hillside Rd					45 Broad St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Cumberland					Cumberland		RI 02864	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/27/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jordan	M	Stone		Peregrine Property Management			
<b>Street Address</b>					<b>Street Address</b>			
65 Wagon Rd.					20 Newman Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Westwood					Rumford		RI 02916	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/31/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Timothy		Straight		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
626 Partridge Avenue								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Menlo Park					CA		94025	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/30/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Daniel		Sullivan		Collette			
<b>Street Address</b>					<b>Street Address</b>			
16 Garwaine Dr					162 Middle St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Lincoln					Pawtucket		RI 02860	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donna		Sullivan		Town of Cumberland			
<b>Street Address</b>					<b>Street Address</b>			
17 sayles Ave					45 Broad St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Lincoln					Cumberland		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/15/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donald	R	Sweitzer		IGT / GTECH			
<b>Street Address</b>					<b>Street Address</b>			
250 Major Potter Rd					10 Memorial Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Suzanne		Tellier		Retired			
<b>Street Address</b>					<b>Street Address</b>			
75 Willis Dr					75 Willis Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph		Terino	Jr.	Tercat Tool & Die Co.			
<b>Street Address</b>					<b>Street Address</b>			
15 Justin Road					31 Delaine St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/16/2018		750.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Alfred	G	Thibodeau		Thibodeau & Baker LLC			
<b>Street Address</b>					<b>Street Address</b>			
246 Abbott Run Valley Rd					1420 Mendon Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Stephen		Thibodeau		The Stephen Thibodeau Group			
<b>Street Address</b>					<b>Street Address</b>			
282 Highland Ave					144 Wayland Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/21/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Laurent	D.	Toupin		Brainsky Levinson, LLC			
<b>Street Address</b>					<b>Street Address</b>			
185 Manville Hill Rd					1543 Fall River Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cumberland			RI	02864	Seekonk	MA	02771	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/29/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	F.	Trainor		Michael Trainor Consulting			
<b>Street Address</b>					<b>Street Address</b>			
240 Gibbs Ave					349 Warren Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Newport			RI	02840	East Providence	RI	02914	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Melissa	D.	Travis		Faulkner Consulting Group			
<b>Street Address</b>					<b>Street Address</b>			
92 Sleepy Hollow Dr					PO Box 113			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cumberland			RI	02864	Barrington	RI	02806	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/28/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Melissa	D.	Travis		Faulkner Consulting Group			
<b>Street Address</b>					<b>Street Address</b>			
92 Sleepy Hollow Dr					PO Box 113			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cumberland			RI	02864	Barrington	RI	02806	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/23/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joy Ann		Vaudreuil		Butler Hospital			
<b>Street Address</b>					<b>Street Address</b>			
44 Temple Pl.					345 Blackstone Blvd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Central Falls			RI	02863	Providence	RI	02906	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/30/2018		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas		Ward		Valley Breeze		
<b>Street Address</b>					<b>Street Address</b>		
59 Little Pond County Rd					6 Blackstone Valley Place		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	08/25/2018		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Daniel	C	Waugh		Moses, Afonso, Jackvony, Ltd		
<b>Street Address</b>					<b>Street Address</b>		
106 Elmgrove Ave.					141 Westminister St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/01/2018		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Henry	B	Wright	III	Rhode Island Farm Bureau		
<b>Street Address</b>					<b>Street Address</b>		
120 B Breakheart Hill Road					16B Nooseneck Hill Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Greenwich			RI	02817	West Greenwich	RI	02817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			HOPE RI PAC				
<b>Street Address</b>					<b>Street Address</b>		
181-A KNIGHT STREET							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
WARWICK			RI	02886			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	08/20/2018		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			IUOE LOCAL 57 (International Union of Operating				
<b>Street Address</b>					<b>Street Address</b>		
857 CENTRAL AVENUE							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
JOHNSTON			RI	02919			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	08/27/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
			RI SOCIETY CPA PAC INC			
<b>Street Address</b>					<b>Street Address</b>	
40 SHARPE DRIVE-UNIT 5						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
CRANSTON			RI	02920		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	08/28/2018		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
			RI TRUCKING ASSOCIATION PAC			
<b>Street Address</b>					<b>Street Address</b>	
660 ROOSEVELT AVENUE						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
PAWTUCKET			RI	02860		

**SCHEDULE OF EXPENDITURES**

Key #	Full Name of Candidate or Committee	Reporting Period	
2,235	DANIEL J MCKEE	From: 08/15/2018	To: 09/04/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Account Payable	Rent & Utilities	\$450.00

**Purpose of Expenditure**

rent

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Sprout CoWorking		
Street Address			City	State	Zip
166 Valley Street, Bldg 6M #103			Providence	RI	02909

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2251	08/28/2018		Campaign Expenditure	Employee Services	\$200.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Sarah		Achille		
Street Address			City	State	Zip
22 Bay St			North Kingstown	RI	02852

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/24/2018		Campaign Expenditure	Bank Fees	\$37.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/28/2018		Campaign Expenditure	Bank Fees	\$67.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/21/2018		Campaign Expenditure	Bank Fees	\$80.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Campaign Expenditure	Bank Fees	\$47.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
DM	09/03/2018		Campaign Expenditure	Bank Fees	\$67.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/04/2018		Campaign Expenditure	Bank Fees	\$50.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aristotle, Inc.		
Street Address			City	State	Zip
205 Pennsylvania Avenue, SE			Washington	DC	20003

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/18/2018		Campaign Expenditure	Fundraising Expenses	\$180.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Aurora Restaurant		
Street Address			City	State	Zip
516 Prairie a Venue			Providence	RI	02905

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2255	08/28/2018		Campaign Expenditure	Advertising	\$774.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Beacon Communications, Inc.		
Street Address			City	State	Zip
1944 Warwick Ave			Warwick	RI	02889

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/30/2018		Campaign Expenditure	Fundraising Expenses	\$86.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Big Tony's Pizza		
Street Address			City	State	Zip
525 Eaton St			Providence	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/17/2018		Campaign Expenditure	Fundraising Expenses	\$143.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Big Tony's Pizza		
Street Address			City	State	Zip
525 Eaton St			Providence	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2273	08/31/2018		Campaign Expenditure	Donations (All Others)	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Blackstone Valley Prep Highschool		
Street Address			City	State	Zip
65 Macondray St			Cumberland	RI	02864

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Campaign Expenditure	Consultant & Professional Services	\$200.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Blue Utopia		
Street Address			City	State	Zip
PO Box 4486			98194	WA	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2271	08/31/2018		Campaign Expenditure	Employee Services	\$50.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Estarlin	J	Bonilla		
Street Address			City	State	Zip
26 Mawney St			Providence	RI	02907

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/04/2018		Campaign Expenditure	Advertising	\$50,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Buying Time, LLC		
Street Address			City	State	Zip
650 Massachusetts Ave NW Suite 210			Washington	DC	20001

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/20/2018		Campaign Expenditure	Advertising	\$30,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Buying Time, LLC		
Street Address			City	State	Zip
650 Massachusetts Ave NW Suite 210			Washington	DC	20001



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/28/2018		Campaign Expenditure	Advertising	\$40,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Buying Time, LLC	
Street Address	City	State	Zip	
650 Massachusetts Ave NW Suite 210	Washington	DC	20001	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
793	08/28/2018		Campaign Expenditure	Fundraising Expenses	\$2,803.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Cafe Nuovo	
Street Address	City	State	Zip	
One Citizens Plaza	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2263	08/31/2018		Campaign Expenditure	Employee Services	\$234.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Ercilia		Cano	
Street Address	City	State	Zip	
137 Houston St, 1st Fl	Providence	RI	02905	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2240	08/23/2018		Campaign Expenditure	Employee Services	\$108.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Ercilia		Cano	
Street Address	City	State	Zip	
137 Houston St, 1st Fl	Providence	RI	02905	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2237	08/23/2018		Campaign Expenditure	Employee Services	\$50.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Luz		Caraballo	
Street Address	City	State	Zip	
18 Woodmont St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2230	08/17/2018		Campaign Expenditure	Employee Services	\$150.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Luz		Caraballo	
Street Address	City	State	Zip	
18 Woodmont St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2265	08/31/2018		Campaign Expenditure	Employee Services	\$60.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Luz		Caraballo	
Street Address	City	State	Zip	
18 Woodmont St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2258	08/31/2018		Campaign Expenditure	Employee Services	\$782.94

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Cheyenne		Cazeault	
Street Address	City	State	Zip	
109 Willian Henry Rd	North Scituate	RI	02857	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2224	08/15/2018		Campaign Expenditure	Employee Services	\$782.94

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Cheyenne		Cazeault	
Street Address	City	State	Zip	
109 Willian Henry Rd	North Scituate	RI	02857	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
764	08/23/2018		Campaign Expenditure	Fundraising Expenses	\$250.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Club Lusitana	
Street Address	City	State	Zip	
	Cumberland	RI		

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
791	08/22/2018		Campaign Expenditure	Donations (All Others)	\$1,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			COAAST	
Street Address	City	State	Zip	
249 Woodruff Ave	South Kingstown	RI	02879	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2247	08/28/2018		Campaign Expenditure	Employee Services	\$150.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Abby		Cobb	
Street Address	City	State	Zip	
139 Stonehenge Rd	North Kingstown	RI	02881	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
763	08/22/2018		Campaign Expenditure	Donations (All Others)	\$1,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CODAC		
Street Address			City	State	Zip
349 Huntington Ave			Providence	RI	02909

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2246	08/28/2018		Campaign Expenditure	Employee Services	\$150.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Daniel		Costello		
Street Address			City	State	Zip
5 Brett Dr			Foster	RI	02825

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2272	08/31/2018		Campaign Expenditure	Consultant & Professional Services	\$3,080.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Estrada Bookkeeping/Political Consultin		
Street Address			City	State	Zip
60 Christopher Street			Providence	RI	02904

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Campaign Expenditure	Advertising	\$491.82

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Facebook Ads		
Street Address			City	State	Zip

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2239	08/23/2018		Campaign Expenditure	Employee Services	\$90.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Maria		Florian		
Street Address			City	State	Zip
68 Russe St			Cranston	RI	02910

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2264	08/31/2018		Campaign Expenditure	Employee Services	\$240.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Maria		Florian		
Street Address			City	State	Zip
68 Russe St			Cranston	RI	02910

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2259	08/31/2018		Campaign Expenditure	Employee Services	\$421.18

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Jakob		Frenette	
Street Address	City	State	Zip	
375 Collins Taft Rd	Harrisville	RI	02830	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2225	08/15/2018		Campaign Expenditure	Employee Services	\$782.94

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Jakob		Frenette	
Street Address	City	State	Zip	
375 Collins Taft Rd	Harrisville	RI	02830	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
792	08/16/2018		Campaign Expenditure	Donations (Political)	\$50.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Friends of Luis Aponte	
Street Address	City	State	Zip	
197 Indiana Ave	Providence	RI	02905	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2275	09/04/2018		Campaign Expenditure	Consultant & Professional Services	\$750.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Galvin & Associates	
Street Address	City	State	Zip	
320 Newport Ave	Rumford	RI	02916	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2242	08/23/2018		Campaign Expenditure	Employee Services	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Erminia		Garcia	
Street Address	City	State	Zip	
10 Congress St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2266	08/31/2018		Campaign Expenditure	Employee Services	\$186.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Erminia		Garcia	
Street Address	City	State	Zip	
10 Congress St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2260	08/31/2018		Campaign Expenditure	Employee Services	\$592.25

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Emma		Gauthier	
Street Address	City	State	Zip	
162 Dean St	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2226	08/15/2018		Campaign Expenditure	Employee Services	\$592.25

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Emma		Gauthier	
Street Address	City	State	Zip	
162 Dean St	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2234	08/23/2018		Campaign Expenditure	Consultant & Professional Services	\$12,800.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			GBA Strategies	
Street Address	City	State	Zip	
1901 L Street, NW, Suite 702	Washington	DC	20036	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2236	08/23/2018		Campaign Expenditure	Employee Services	\$190.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Keila		Gonzalez	
Street Address	City	State	Zip	
440 Woodward	North Providence	RI	02904	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2232	08/17/2018		Campaign Expenditure	Employee Services	\$90.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Keila		Gonzalez	
Street Address	City	State	Zip	
440 Woodward	North Providence	RI	02904	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2268	08/31/2018		Campaign Expenditure	Employee Services	\$272.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Keila		Gonzalez	
Street Address	City	State	Zip	
440 Woodward	North Providence	RI	02904	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2245	08/23/2018		Campaign Expenditure	Advertising	\$53.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Hall of GraFX		
Street Address			City	State	Zip
350 Kinsley Ave			Providence	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Campaign Expenditure	Consultant & Professional Services	\$130.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Hubdialer		
Street Address			City	State	Zip
7700 Eastport Park			New York	NY	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/15/2018		Campaign Expenditure	Employee Services	\$571.20

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Internal Revenue Service		
Street Address			City	State	Zip

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2252	08/28/2018		Campaign Expenditure	Employee Services	\$250.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Allison		Lantagne		
Street Address			City	State	Zip
8 Parkhurst Dr			Hudson	NH	03051

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
798	08/31/2018		Campaign Expenditure	Donations (All Others)	\$1,000.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Latino Public Radio		
Street Address			City	State	Zip
1246 Cranston Street			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2267	08/31/2018		Campaign Expenditure	Employee Services	\$168.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Mercedes		Lopez		
Street Address			City	State	Zip
189 Althea St			Providence	RI	02907

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2241	08/23/2018		Campaign Expenditure	Employee Services	\$108.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Mercedes		Lopez	
Street Address	City	State	Zip	
189 Althea St	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2238	08/23/2018		Campaign Expenditure	Employee Services	\$204.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Lourdes		Lugo	
Street Address	City	State	Zip	
21 Burnside St	Cranston	RI	02910	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2229	08/17/2018		Campaign Expenditure	Employee Services	\$244.00

**Purpose of Expenditure**

Phone Banking

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Lourdes		Lugo	
Street Address	City	State	Zip	
21 Burnside St	Cranston	RI	02910	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2269	08/31/2018		Campaign Expenditure	Employee Services	\$252.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Lourdes		Lugo	
Street Address	City	State	Zip	
21 Burnside St	Cranston	RI	02910	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2253	08/28/2018		Campaign Expenditure	Employee Services	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Lauren		Malouin	
Street Address	City	State	Zip	
54 Moswansicut Lake Dr	North Scituate	RI	02857	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
DM	09/04/2018		Campaign Expenditure	Bank Fees	\$2.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Merchant BankCard	
Street Address	City	State	Zip	
12120 Sunset Hills Rd, Suite 500	Reston	VA	20190	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
797	08/31/2018		Campaign Expenditure	Fundraising Expenses	\$889.60

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			MICKEY'S G'S CLAM SHACK		
Street Address			City	State	Zip
5 Avon Street			CUMBERLAND	RI	02864

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2257	08/29/2018		Campaign Expenditure	Fundraising Expenses	\$230.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			MLR Artist Mgmt		
Street Address			City	State	Zip
535 Pleasant Valley Pkwy			Providence	RI	02908

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/28/2018		Campaign Expenditure	Bank Fees	\$20.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Navigant Credit Union		
Street Address			City	State	Zip
1005 Douglas Pike			Smithfield	RI	02917

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/20/2018		Campaign Expenditure	Bank Fees	\$20.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Navigant Credit Union		
Street Address			City	State	Zip
1005 Douglas Pike			Smithfield	RI	02917

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/04/2018		Campaign Expenditure	Bank Fees	\$20.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Navigant Credit Union		
Street Address			City	State	Zip
1005 Douglas Pike			Smithfield	RI	02917

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2270	08/31/2018		Campaign Expenditure	Employee Services	\$252.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Adria	B	Pena		
Street Address			City	State	Zip
50 Bowlet St			Providence	RI	02909



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2235	08/23/2018		Campaign Expenditure	Employee Services	\$240.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Adria	B	Pena		
Street Address			City	State	Zip
50 Bowlet St			Providence	RI	02909

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2231	08/17/2018		Campaign Expenditure	Employee Services	\$228.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Adria	B	Pena		
Street Address			City	State	Zip
50 Bowlet St			Providence	RI	02909

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2244	08/23/2018		Campaign Expenditure	Employee Services	\$108.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Marlyn		Pimentel Feliz		
Street Address			City	State	Zip
71 Superior St			Providence	RI	02907

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2262	08/31/2018		Campaign Expenditure	Employee Services	\$216.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Marlyn		Pimentel Feliz		
Street Address			City	State	Zip
71 Superior St			Providence	RI	02907

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2254	08/28/2018		Campaign Expenditure	Employee Services	\$100.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Emily		Plasse		
Street Address			City	State	Zip
131 Westcott Rd			North Scituate	RI	02857

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2249	08/28/2018		Campaign Expenditure	Employee Services	\$300.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Cameron		Poe		
Street Address			City	State	Zip
258 Delano Dr			North Kingstown	RI	02852

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2248	08/28/2018		Campaign Expenditure	Employee Services	\$350.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Andre		Prado	
Street Address	City	State	Zip	
5 Washington St	Central Falls	RI	02863	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
762	08/22/2018		Campaign Expenditure	Donations (All Others)	\$1,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Providence Rescue Mission	
Street Address	City	State	Zip	
627 Cranston St #1	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2228	08/17/2018		Campaign Expenditure	Rent & Utilities	\$300.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Ana		Quezada	
Street Address	City	State	Zip	
301 Reservoir Ave	Providence	RI	02907	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2233	08/23/2018		Campaign Expenditure	Advertising	\$450.47

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Regine Printing	
Street Address	City	State	Zip	
208 Laurel Hill Ave	Providence	RI	02909	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2227	08/16/2018		Campaign Expenditure	Employee Services	\$88.89

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			RI Division of Taxation	
Street Address	City	State	Zip	
PO Box 9703, Dept 200	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
790	08/15/2018		Campaign Expenditure	Donations (All Others)	\$1,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			RICARES	
Street Address	City	State	Zip	
1345 Jefferson Blvd, 1E	Warwick	RI	02886	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/25/2018		Campaign Expenditure	Fundraising Expenses	\$18.10

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Save-A-Lot	
Street Address			City	State Zip
361 Reservoir Ave			Providence	RI 02907

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2261	08/31/2018		Campaign Expenditure	Employee Services	\$216.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Daphne	R	Severino Genao	
Street Address			City	State Zip
58 Fisk St			Providence	RI 02905

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2243	08/23/2018		Campaign Expenditure	Employee Services	\$108.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Daphne	R	Severino Genao	
Street Address			City	State Zip
58 Fisk St			Providence	RI 02905

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2250	08/28/2018		Campaign Expenditure	Employee Services	\$300.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Kyra		Shlesinger	
Street Address			City	State Zip
41 Hope Furnace Rd			Hope	RI 02831

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/15/2018		Campaign Expenditure	Advertising	\$1,497.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Signrocket.com	
Street Address			City	State Zip
340 Broadway Ave			St. Paul Park	MN 55071

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
759	08/16/2018		Campaign Expenditure	Refunds/Reimbursements	\$308.34

**Purpose of Expenditure**

Posters/Lawn Signs

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	ANTHONY		SILVA	
Street Address			City	State Zip
50 DAVID STREET			CUMBERLAND	RI

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
765	08/23/2018		Campaign Expenditure	Employee Services	\$136.41

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	ANTHONY		SILVA	
Street Address	City	State	Zip	
50 DAVID STREET	CUMBERLAND	RI		

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2018		Campaign Expenditure	Office Equipment & Supplies	\$26.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Square Space	
Street Address	City	State	Zip	
225 Varrick St, 12 Floor	New York	NY	10014	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/15/2018		Campaign Expenditure	Food, Beverages and Meals	\$4.91

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Stop & Shop	
Street Address	City	State	Zip	
1128 Mineral Spring Avenue	North Providence	RI	02908	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/17/2018		Campaign Expenditure	Fundraising Expenses	\$20.72

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Stop & Shop	
Street Address	City	State	Zip	
1128 Mineral Spring Avenue	North Providence	RI	02908	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/20/2018		Campaign Expenditure	Fundraising Expenses	\$56.72

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Target	
Street Address	City	State	Zip	
620 George Washington Hgwy	Lincoln	RI	02865	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
761	08/18/2018		Campaign Expenditure	Food, Beverages and Meals	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			The 100 Club of Rhode Island, Inc.	
Street Address	City	State	Zip	
222 Chestnut St	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
766	08/28/2018		Campaign Expenditure	Advertising	\$304.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			The Valley Breeze		
Street Address			City	State	Zip
6 Blackstone Valley Place			Lincoln	RI	02865

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
767	08/31/2018		Campaign Expenditure	Advertising	\$535.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			The Valley Breeze		
Street Address			City	State	Zip
6 Blackstone Valley Place			Lincoln	RI	02865

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/29/2018		Campaign Expenditure	Advertising	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Twitter		
Street Address			City	State	Zip
1355 Market St			San Francisco	CA	94103

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/01/2018		Campaign Expenditure	Fundraising Expenses	\$56.68

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Walmart		
Street Address			City	State	Zip
South Washington St			South Attleboro	MA	02703

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
2274	09/03/2018		Refund of Contribution	Other	\$50.00

**Purpose of Expenditure**

Over Contribution

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Michael		Baird		
Street Address			City	State	Zip
800 Gibson Hill Rd			Greene	RI	02827