

**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#
ALLAN W FUNG	5080

Street Address	City/Town, State and Zip Code
1581 PHENIX AVE	CRANSTON, RI 02921

Mailing Address (if different)	City/Town, State and Zip Code
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Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 825-7166	(401) 580-5136		ALFUNG@COX.NET

If Candidate Office Sought:	Party Affiliation if any:
Governor	Republican

Reporting Period (Dates):	Period Beginning: 10/30/2018	Period Ending: 12/03/2018
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**SUMMARY OF ACTIVITY FOR PERIOD**

1. Beginning Cash Balance	\$ 130,310.75
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	28,100.88
3. Political Parties	0
4. Political Action Committees	1,000.00
5. Loan Proceeds	0
6. Payroll Check off	0
7. Interest Received	1.56
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	(1,350.00)
14. Returned Checks	0
b. Other:	0
	0
	0
	0
3. Total Cash	158,063.19
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	128,708.59
c. Repayment of Loans	25,000.00
d. Account Payable Repayments	0
e. Other	0

4. Cash Disbursements, continued	
f. Other Disbursements	0
	0
	0
5. Ending Cash Balance	\$ 4,354.60

**CAMPAIGN FUND STATUS**

6. Report of In-Kind Contributions	424.70
7. Cash	\$ 4,354.60
8. Other Assets	0
	0
	0
9. Total Assets	\$ 4,354.60

**LIABILITIES AND FUND BALANCE**

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	0
c. Other Liabilities	0
	0
	0
11. Total Liabilities	0
12. Total Fund Balance	\$ 4,354.60
13. Total Liability / Fund Balance	4,354.60

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> 5,080	<b>Full Name of Candidate or Committee</b> ALLAN W FUNG	<b>Reporting Period</b> <b>From:</b> 10/30/2018 <b>To:</b> 12/03/2018
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<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	In-Kind	In-Kind - Individual	10/30/2018		100.20

**In Kind/Other Receipts Description**

Printing Services

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jenny		Carvalho		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
11 Pontiac Ave								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Narragansett					Ri		02882	

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	In-Kind	In-Kind - Individual	10/30/2018		324.50

**In Kind/Other Receipts Description**

Food Services

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	James		Paolucci		Cowesett Inn			
<b>Street Address</b>					<b>Street Address</b>			
6 Martingale Dr					226 Cowesett Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Warwick					RI		02886	
					West Warwick		RI 02893	

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	Cash	Individual	11/02/2018	11/02/2018	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			
	Angelo		Aiello		AA Insulation			
<b>Street Address</b>					<b>Street Address</b>			
50 King St					50 King St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Johnston					RI		02919	

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	Check	Individual	11/03/2018	11/03/2018	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			
	Tania	A	Alexander		Mcelroy, Deutsch, Malvaney & Carpenter, Llp			
<b>Street Address</b>					<b>Street Address</b>			
22 Whispering Pines Terrace					701 Woodland Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Greenville					RI		02828	
					Westfield		NJ 07090	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Joseph		Almeida		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
55 Tache St								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Woonsocket					RI		02895	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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			
	Danielle		Armstrong		Homestic Real Estate			
<b>Street Address</b>					<b>Street Address</b>			
77 Day St					271 Doric St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Brooklyn					CT		06234	
					Cranston		RI 02910	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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		Balzano		Retired			
<b>Street Address</b>					<b>Street Address</b>			
17 East Quail Run					17 East Quail Run			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Charlestown					RI		02813	
					Charlestown		RI 02813	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Jeffrey	P	Barone		City of Cranston			
<b>Street Address</b>					<b>Street Address</b>			
266 Scituate Ave					869 Park Avenue			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Cranston					RI		02921	
					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Jeffrey	P	Barone		City of Cranston			
<b>Street Address</b>					<b>Street Address</b>			
266 Scituate Ave					869 Park Avenue			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Cranston					RI		02921	
					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Barbara		Barrow		Moore, Virgadamo & Lynch Ltd			
<b>Street Address</b>					<b>Street Address</b>			
1 Wedgewood Dr					97 John Clarke Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Middletown					Middletown		RI	02842

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Harry		Bassett		Assurant Inc			
<b>Street Address</b>					<b>Street Address</b>			
10825 S W 60 Ave					11122 Quail Roost Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Miami					Miami		FL	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Harry		Bassett		Assurant Inc			
<b>Street Address</b>					<b>Street Address</b>			
10825 S W 60 Ave					11122 Quail Roost Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Miami					Miami		FL	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Lisa		Baxter		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
12 Spur Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Foster							RI	02825

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	5.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David		Berke		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 1099					PO Box 1099			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Gualala					Gualala		CA	95445

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Nicholas		Bianchi		Retired			
<b>Street Address</b>					<b>Street Address</b>			
29 Elm St					29 Elm St			
<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
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	15.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joan		Bianco		IBR Realty			
<b>Street Address</b>					<b>Street Address</b>			
138 Scenic Dr					1057 Reservoir 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
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Harrison		Bilodeau		Bilodeau Property Managemant			
<b>Street Address</b>					<b>Street Address</b>			
137 Power St					217 Waterman St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		Brothers	Jr	Student			
<b>Street Address</b>					<b>Street Address</b>			
66 Shirley Blvd					66 Shirley Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		Ri	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Christina		Broughton		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Alyssa Court					56 Alyssa Court			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hope					Hope		RI	02831

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Robert		Burns		Bridgewater State College		
<b>Street Address</b>					<b>Street Address</b>		
51 Moorland Ave					131 Summer St		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston		RI		02905	Bridgewater	MA	02325

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/30/2018	10/30/2018	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		Buteau		Patriot Auto Body		
<b>Street Address</b>					<b>Street Address</b>		
87 Mount Hygeia Rd					341 Pulaski Blvd		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Foster		RI		02825	Bellingham	MA	02019

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Joao		Camara		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
115 park Ave							
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston		Ri		02905			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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		
	Jerry		Carollo		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
11 Pontiac Rd							
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett		RI		02882			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	5.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Chi-Hau		Chen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
415 Bradford Place					415 Bradford Place		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
N Dartmouth		MA		02747	N Dartmouth	MA	02747

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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			
	Karen		Chin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
42 Belvedere St					42 Belvedere St			
<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
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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		Chin		Abacus Benefit Consulants, Inc			
<b>Street Address</b>					<b>Street Address</b>			
:PO Box 8039					55 Stamp Farm Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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		Chin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
42 Belvedere St					42 Belvedere St			
<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
	Credit/Debit Card	Individual	10/30/2018	10/30/2018	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			
	Chutze		Chou		Freelance Reporter			
<b>Street Address</b>					<b>Street Address</b>			
1200 Washington St					1200 Washington St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Boston		MA	02118

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/30/2018	10/30/2018	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			
	Chutze		Chou		Freelance Reporter			
<b>Street Address</b>					<b>Street Address</b>			
1200 Washington St					1200 Washington St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Boston		MA	02118



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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			
	Andrew		Christopher		Akridge			
<b>Street Address</b>					<b>Street Address</b>			
102 P St NW					601 13th St NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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			
	Andrew		Christopher		Akridge			
<b>Street Address</b>					<b>Street Address</b>			
102 P St NW					601 13th St NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Joseph		Chrostowski		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
454 Spring St								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rockville								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Robert		Church		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
343 Green End Ave								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Middletown								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Steven	M	Colagiovanni		Charter Care Medical Associates			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 1096					1524 Atwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Coventry					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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			
	Judith		Coletta		Retired			
<b>Street Address</b>					<b>Street Address</b>			
55 Darwin St					55 Darwin St			
<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
	Cash	Individual	11/02/2018	11/02/2018	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			
	Judith		Connolly		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
73 Sayles Hill Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield					North Smithfield		RI	02896

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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			
	Paul	J	Connolly		Bullseye Shooting			
<b>Street Address</b>					<b>Street Address</b>			
73 Sayles Hill Rd					837 park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield					Woonsocket		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John		Conte		Lifespan			
<b>Street Address</b>					<b>Street Address</b>			
2 Donald Ross Rd					2 Dudley Str			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John		Conte		Lifespan			
<b>Street Address</b>					<b>Street Address</b>			
2 Donald Ross Rd					2 Dudley Str			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Brian		Crum		Gentry Self Moving		
<b>Street Address</b>					<b>Street Address</b>		
31 1/2 Boswell Tr					1425 Cranston St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Foster			RI	02825	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/07/2018	11/07/2018	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	V	D'Ambra		D'ambra Construction		
<b>Street Address</b>					<b>Street Address</b>		
800 Jefferson Blvd					1645 Warwick Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02887	Warwick	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Leann		D'ettore		Next Home Realty		
<b>Street Address</b>					<b>Street Address</b>		
6 Isabelle Dr					271 Doric Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	PROVIDence	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Joseph		Danti		Danti & Sons		
<b>Street Address</b>					<b>Street Address</b>		
494 Putnam Pike Apt A2					494 Putnam Pike		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828	Greenville	RI	02828

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	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		
	Richard		Davids		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10 Queens River Dr					10 Queens River Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Kingston			RI	02892	West Kingston	RI	02892

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/03/2018	11/03/2018	20.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Todd		Davis		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 7803								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cumberland			RI	02864				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Richard		De La Zerda		The Massachusetts Exec Office of Technology Services and Sec			
<b>Street Address</b>					<b>Street Address</b>			
50 Cone Dr					1 Ashburthor Place			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
West Warwick			RI	02893	Boston	MA	02108	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Vilma		Deleon		Retired			
<b>Street Address</b>					<b>Street Address</b>			
54 Seaview Ave					54 Seaview Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cranston			RI	02905	Cranston	RI	02905	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Joseph	A	Delsesto		Keller Williams Realty			
<b>Street Address</b>					<b>Street Address</b>			
35 Riverfarm Rd					1170 Pontiac Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cranston			Ri	02910	Cranston	RI	02910	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Money Order	Individual	10/30/2018	10/30/2018	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			
	Vin		DiMeglio		DiMeglio Builders			
<b>Street Address</b>					<b>Street Address</b>			
290 Beechwood Dr					290 Beechwood Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cranston			RI	02921	Cranston	RI	02921	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Sharon		Dong		Abacus Benefit Consultants, Inc			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 8039					55 Stamp Farm Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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			
	Gary		Doster		Belknap White Group			
<b>Street Address</b>					<b>Street Address</b>			
26 Emma James Way					111 Plymouth St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tiverton					Mansfield		MA	02048

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Richard		Dulgarian		American Entertainment			
<b>Street Address</b>					<b>Street Address</b>			
31 Meredith Dr					31 Meredith Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	35.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Binyamin		Efreom		Retired			
<b>Street Address</b>					<b>Street Address</b>			
53 Pocono Dr					53 Pocono Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02888

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Binyamin		Efreom		Retired			
<b>Street Address</b>					<b>Street Address</b>			
53 Pocono Dr					53 Pocono Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02888

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	5.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Emmanuel		Egbe		Owner			
<b>Street Address</b>					<b>Street Address</b>			
2402 Atlantic Ave					2402 Atlantic Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					Brooklyn		CT	11233

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	5.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Emmanuel		Egbe		Owner			
<b>Street Address</b>					<b>Street Address</b>			
2402 Atlantic Ave					2402 Atlantic Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					Brooklyn		CT	11233

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	125.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	E Michael		Ellis		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
610 South County Trail								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					North Kingstown		RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Robin		Engle		Little Kids Inc			
<b>Street Address</b>					<b>Street Address</b>			
132 Freeman Pkwy					590 N Falmouth Hwy # A			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					North Falmouth		MA	02556

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	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			
	Kim		Faucher		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
7 Grassy Plain Rd					7 Grassy Plain 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	11/02/2018	11/02/2018	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			
	Lori	A	Fuka		Washington Trust			
<b>Street Address</b>					<b>Street Address</b>			
34 Brayton St					23 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Westerly		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ronald		Fuoroli		City of Cranston			
<b>Street Address</b>					<b>Street Address</b>			
60 Begium St					5 Garfield Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Joseph		Galligan		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
4 Suncrest Dr								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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		Gilick		UNFI			
<b>Street Address</b>					<b>Street Address</b>			
244 Valley St 3					555 Valley St			
<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
	Check	Individual	11/07/2018	11/07/2018	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			
	Larry	J.	Giorgi		LJ Plumbing & Heating, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
4 Sherwood Avenue					4 Sherwood Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Centerdale					Centerdale		RI	02911

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Teresa		Gowdey		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
264 Simmonsville Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02910			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		Graf		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
78 Old Quarry Rd							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Scituate			RI	02857			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	225.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Nicholas	A	Grasso		Gas Security		
<b>Street Address</b>					<b>Street Address</b>		
39 Marne St					74 Byfield St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Rose Marie		Grasso		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
39 Marne St							
<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
	Credit/Debit Card	Individual	11/08/2018	11/08/2018	13.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Mary		Greenberg		Retired		
<b>Street Address</b>					<b>Street Address</b>		
589 Woodward Rd					589 Woodward Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Providence			RI	02904	North Providence	RI	02904



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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			
	Gail		Grossi		Citizens Bank			
<b>Street Address</b>					<b>Street Address</b>			
32 Zachariah Place					Atwood Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Warwick			RI	02889	Cranston	RI	02920	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	36.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Eileen		Grossman		State of South Carolina Dept of Corrections			
<b>Street Address</b>					<b>Street Address</b>			
108 Lake House Dr					8301 Parklane Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Pooler			GA	31322	Columbia	SC	29223	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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			
	Alexander		Guarino		Basta Restaurant			
<b>Street Address</b>					<b>Street Address</b>			
44 Bedson Rd					2195 Broad St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Cranston			RI	02910	Cranston	RI	02905	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Ralph		Guerrero		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
297 Water St								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Portsmouth			RI	02871				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	20.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	George		Hadley		Retired			
<b>Street Address</b>					<b>Street Address</b>			
6 Edgehill Avenue					6 Edgehill Avenue			
<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
	Credit/Debit Card	Individual	11/01/2018	11/01/2018	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			
	Rose Anne		Hadley		Retired			
<b>Street Address</b>					<b>Street Address</b>			
18 Ledgewood Rd					18 Ledgewood Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Kingston			RI	02881	Kingston	RI	02881	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Nabil		Hannoush		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
170 Munger Hill Rd								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Westfield			MA	01085				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Lynda		Hawkins		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
226 Plain Meeting House Rd								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
West Greenwich			RI	02817				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Charles		Hawkins	Sr	Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 315								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Coventry			RI	02816				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	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			
	Marie		Hopkins		Eleanor Slater Hospital			
<b>Street Address</b>					<b>Street Address</b>			
6 Kennedy Dr					111 Howard Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Warwick			RI	02889	Cranston	RI	02920	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Stacia		Huyler		Not Employed			
<b>Street Address</b>					<b>Street Address</b>			
57 Stiness Dr					57 Stiness 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	10/30/2018	10/30/2018	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			
	Brenda		Jacob		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
214 Plain Meeting House Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich							RI	02817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Holly		Knott		Washington Trust			
<b>Street Address</b>					<b>Street Address</b>			
2 Bass Rock Rd					23 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Carolina					Westerly		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Alexander		Knowles		Retired			
<b>Street Address</b>					<b>Street Address</b>			
108 Southwest Ave					108 Southwest Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jamestown					Jamestown		RI	02835

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	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			
	Ronald		Kobyashi		Retired			
<b>Street Address</b>					<b>Street Address</b>			
9 Barton Ln					9 Barton Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Middletown					Middletown		RI	02842

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Il Sok	S	Koh		New England Acupuncture			
<b>Street Address</b>					<b>Street Address</b>			
175 Nate Whipl Hwy					175 Nate Whipl Hwy			
<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
	Check	Individual	10/30/2018	10/30/2018	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			
	George		Kudlak		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
440 Hog House Hill Rd								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Exeter					Exeter		RI 02822	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Michelle		Lachapelle		Donada, Inc			
<b>Street Address</b>					<b>Street Address</b>			
667 Providence St					667 Providence St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Woonsocket					Woonsocket		RI 02859	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Julie		Lamin		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
751 Hartford Pike								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
North Scituate					North Scituate		RI 02857	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	125.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Feng		Lei		Green Island Realty			
<b>Street Address</b>					<b>Street Address</b>			
186 Sleepy Hollow Farm Rd					798 Park Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Warwick					Cranston		RI 02910	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Ralph		Leone		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
76 Kenway Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	David	J	Levesque		Brewed Awakenings		
<b>Street Address</b>					<b>Street Address</b>		
9 Thayer Ave					1395 Atwood Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Johnston	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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		
	Donna		Levesque		IGT		
<b>Street Address</b>					<b>Street Address</b>		
207 Alpine Estates Dr					10 Memorial Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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		
	Donna		Levesque		IGT		
<b>Street Address</b>					<b>Street Address</b>		
207 Alpine Estates Dr					10 Memorial Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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		Mansuetti		Providence College		
<b>Street Address</b>					<b>Street Address</b>		
11 Lexington Ave					1 Cunningham Sq		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02904	Providence	RI	02918

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Julian		Marcello	Jr	Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
40 Peveril Rd								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston			RI	02921				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Anthony	R	Marciano		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
103 Gordon St								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Brighton			MA	02135				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Evelyn		Marocco		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
31 Zinnia Dr								
<b>City</b>			<b>State</b>	<b>Zip</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	11/02/2018	11/02/2018	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			
	C		Marocco Wahl		Retired			
<b>Street Address</b>					<b>Street Address</b>			
21 East 78th St, Apt D					21 East 78th St, Apt D			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
New York			NY	10128	new york		NY	10128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Dawn		Mattera		Grace Family Chiropractic			
<b>Street Address</b>					<b>Street Address</b>			
725 Admiral St					1250 Warwick Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Providence			RI	02908	Warwick		RI	02888

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Lesley		Maxwell		Retired		
<b>Street Address</b>					<b>Street Address</b>		
14 Eden Park Dr					14 Eden Park Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02910	Cranston	RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Judith		McAuley		Retired		
<b>Street Address</b>					<b>Street Address</b>		
129 Lake View Dr					129 Lake View Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chepachet			RI	02814	Chepachet	RI	02814

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	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		
	William		McCourt		CAI Software LLC		
<b>Street Address</b>					<b>Street Address</b>		
8 Pine Grove Ave					36 Thurber Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Smithfield	RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Lacey		McGreevy		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
17 Boxwood Court					17 Boxwood Court		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879	Wakefield	RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Michael		Metz		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
848 Saint Andrews Dr							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Columbia Falls			MT	59912			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Douglas		Moorcroft		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
724 Stony Fort Rd							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saunderstown			RI	02874			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Sandra		Morse		Retired		
<b>Street Address</b>					<b>Street Address</b>		
133 Bear Hill Rd					133 Bear Hill Rd		
<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	11/02/2018	11/02/2018	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		Mota		Go Go Media		
<b>Street Address</b>					<b>Street Address</b>		
56 Alpine Estates Dr					101 Comstock Pkwy		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	CRanston	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	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		Nahrgang		Town of East Greenwich PD		
<b>Street Address</b>					<b>Street Address</b>		
3595 Post Rd, 8809					111 Pierce St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	East Greenwich	RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	125.00

**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	O'Neil		US Airways		
<b>Street Address</b>					<b>Street Address</b>		
255 Warner Brook Dr					Logan Airport		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889	Boston	MA	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/01/2018	11/01/2018	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			
	Sandra	M	Panciera		Starkweather & Shepley Insurance			
<b>Street Address</b>					<b>Street Address</b>			
8 Anglewood Ave					60 Catamore Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					East Providence		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Louis		Paolino		Lifetime Medical			
<b>Street Address</b>					<b>Street Address</b>			
19 Heritage Dr					235 Lonsdale Ave			
<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
	Credit/Debit Card	Individual	10/30/2018	10/30/2018	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			
	Maria		Perry		Women & Infants Hospital			
<b>Street Address</b>					<b>Street Address</b>			
121 Walden Way					100 Plain St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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		Persson		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
156 Rangeley Rd								
<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	10/30/2018	10/30/2018	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	R.S.	Picerne		Picerne Real Estate Group			
<b>Street Address</b>					<b>Street Address</b>			
6737 North 60th Street					75 Lambert Lind Highway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Paradise Valley					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/07/2018	11/07/2018	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		Procaccianti		The Procaccianti Group		
<b>Street Address</b>					<b>Street Address</b>		
1140 Reservoir Avenue					1140 Reservoir Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02920	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Elizabeth		Reichardt		NBIC		
<b>Street Address</b>					<b>Street Address</b>		
48 Lauren Ct					25 Maple St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Pawtucket	RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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		
	Robert		Relli		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2 Pine Grove Ln					2 Pine Grove Ln		
<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	Individual	11/02/2018	11/02/2018	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		
	Steven	J.	Riley		Key Group		
<b>Street Address</b>					<b>Street Address</b>		
33 Tucker Ave					33 Tucker Avenue, #2		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02905	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/05/2018	11/05/2018	35.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Glen		Ritchotte		Electric Boat		
<b>Street Address</b>					<b>Street Address</b>		
12 Cote Ct					Eastern Point Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Coventry			RI	02816	Groton	CT	06340

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	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			
	Peter	T	Robertson		Law Office of Peter Robertson			
<b>Street Address</b>					<b>Street Address</b>			
210 Melrose St					210 Melrose St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Auburndale					Auburndale		MA	02466

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Harold		Rocketto		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
18 Stenton 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	10/30/2018	10/30/2018	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			
	Margaret	B.	Rogers		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
68 Earles Court					68 Earles Court			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Narragansett		RI	02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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			
	Kayla		Rosati		RI Hospital			
<b>Street Address</b>					<b>Street Address</b>			
69 Apple Tree Ln					2 Dudley St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Richard	J	Ruggieri	MD	Richard J Ruggieri MD			
<b>Street Address</b>					<b>Street Address</b>			
105 John Scott Ln					160 Wayland Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Deberah		Ruisi		Retired			
<b>Street Address</b>					<b>Street Address</b>			
27A Eagle Run					27A Eagle Run			
<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
	Check	Individual	11/07/2018	11/07/2018	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			
	David		Ryan		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
359 Broad St								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence							RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Dionisios		Sampalis		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
20 Kristin Dr								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston							RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/09/2018	11/09/2018	5.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Molly		Saraiva		RI Hospital			
<b>Street Address</b>					<b>Street Address</b>			
18 Intervale Rd					2 Eddy St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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			
	Jill		Scola		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
189 Watch Hill Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly							RI	02891

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Adam		Scott		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
176 Kenyon Hill Trl								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Wyoming			RI	02898				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/07/2018	11/07/2018	29.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Lee	A	Sennick		Wilfred's Seafood, Inc			
<b>Street Address</b>					<b>Street Address</b>			
493 Walnut Hill Road					805 Cumberland Hill Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Woonsocket			RI	02895	Woonsocket		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	475.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Adam		Sepe		North Eastern Tree Service, Inc			
<b>Street Address</b>					<b>Street Address</b>			
69 Chicory Ln					1000 Pontiac Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Catherine		Sepe		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
108 Pontiac Ave								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston			RI	02910				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	10/31/2018	10/31/2018	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			
	David	J.	Shepherd		David J Shepherd, CPA			
<b>Street Address</b>					<b>Street Address</b>			
154 Bear Hill Road, Apt. 1706					154 Bear Hill Road, Apt. 1706			
<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	10/31/2018	10/31/2018	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			
	Douglas	H.	Sherman	Jr.	New England Institute of Technology			
Street Address					Street Address			
4 Split Creek Court					1 New England Tech Boulevard			
City	State	Zip	City	State	Zip	City	State	Zip
Cranston	RI	02921	East Greenwich	RI	02818			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Shirley		Sibielski		Retired			
Street Address					Street Address			
133 Sagamore Rd					133 Sagamore Rd			
City	State	Zip	City	State	Zip	City	State	Zip
Cranston	RI	02920	Cranston	RI	02920			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Michael		Smith		Rhode Island College			
Street Address					Street Address			
24 Moccasin Trail					600 Mt Pleasant Ave			
City	State	Zip	City	State	Zip	City	State	Zip
Cranston	RI		Providence	RI				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Luigia		Solda		Smithfield School Dept			
Street Address					Street Address			
3 Lori Ellen Dr					49 Farnum Pike			
City	State	Zip	City	State	Zip	City	State	Zip
Smithfield	RI	02917	Smithfield	RI	02917			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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			
	Paul		Spadea		City of Pawtucket			
Street Address					Street Address			
364 Woiddhaven Rd					137 Roosevelt Ave			
City	State	Zip	City	State	Zip	City	State	Zip
Pawtucket	RI	02860	Pawtucket	RI	02860			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/01/2018	11/01/2018	10.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Andrew		Spingarn		Andrew Spingarn Designer			
<b>Street Address</b>					<b>Street Address</b>			
37 Taft St					37 Taft 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	11/02/2018	11/02/2018	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			
	Marsha		Sprague		City of Pawtucket			
<b>Street Address</b>					<b>Street Address</b>			
130 Darby Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Scituate					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Craig		Stenning		State of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
6 Woodmansee Court					14 Harrington Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Richmond					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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			
	Kathleen	A.	Swann		Leadership Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
306 Fry Pond Road					1570 Westminster Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Alan		Syslo		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 7123								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick							RI	02887

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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	F	Tasca		Tasca Automotive Group			
<b>Street Address</b>					<b>Street Address</b>			
28 Hi View Dr					1300 Pontiac Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hope					Cranston		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/06/2018	11/06/2018	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			
	Eileen		Terranova		Electric Boat			
<b>Street Address</b>					<b>Street Address</b>			
16 Sleepy Hollow Ct					Eastern Point Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Groton		CT	06340

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	20.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Tusoni		Retired			
<b>Street Address</b>					<b>Street Address</b>			
5 Taylor Court					5 Taylor Court			
<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	10/30/2018	10/30/2018	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			
	Erica		Valentine		Information Requested			
<b>Street Address</b>					<b>Street Address</b>			
13 Livingston St								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Glenn		Valentine		Bristol Warren School Dist			
<b>Street Address</b>					<b>Street Address</b>			
399 Moosehorn Rd					151 State St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Bristol		RI	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	CAROL		VIERRA		City of Cranston		
<b>Street Address</b>					<b>Street Address</b>		
11 APPLE HILL DRIVE					869 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
CRANSTON			RI	02921	Cranston	RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		Walker		Bryant University		
<b>Street Address</b>					<b>Street Address</b>		
39 Roger Williams Dr					1150 Douglas Pike		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828	Smithfield	RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/05/2018	11/05/2018	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		
	Joan	A	Watkinson		INDUSTRIAL REFRIGERATION CORPORATION		
<b>Street Address</b>					<b>Street Address</b>		
66 Kimberly Ln					60 Amflex Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Cranston	RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Tessa	D	Wheeler		Information Requested		
<b>Street Address</b>					<b>Street Address</b>		
444 Warwick Neck Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	11/02/2018	11/02/2018	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		
	Thomas	N	Whipple	III	Cedar Crest Nursing Home		
<b>Street Address</b>					<b>Street Address</b>		
24 Greenwood Ln					125 Scituate Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Cranston	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	John	H	White		Taco Inc.		
Street Address					Street Address		
1160 Cranston Street					1160 Cranston Street		
City		State	Zip	City		State	Zip
Cranston		RI	02920	Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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		
	Marlene	F.	Wolpert		St. Joseph Health Services of RI		
Street Address					Street Address		
61 Wingate Road					200 High Service Avenue		
City		State	Zip	City		State	Zip
Providence		RI	02906	North Providence		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/02/2018	11/02/2018	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		
	Susan	E	Wynne		Assumption College		
Street Address					Street Address		
139 Progress St					500 Salisbury St		
City		State	Zip	City		State	Zip
Lincoln		RI	02865	Worcester		MA	01609

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/07/2018	11/07/2018	382.88

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Sheldon		Yee		Information Requested		
Street Address					Street Address		
250 Orchard St							
City		State	Zip	City		State	Zip
Cranston		RI	02910				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	11/03/2018	11/03/2018	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		
	Ching Yin		Yeung		Information Requested		
Street Address					Street Address		
450 W 42nd St							
City		State	Zip	City		State	Zip
New York		NY	10036				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	10/30/2018	10/30/2018	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			
	Leanne	M.	Zarella		Revens Revens & St. Pierre			
<b>Street Address</b>					<b>Street Address</b>			
40 River Farm Drive					946 Centerville Road			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
East Greenwich					Warwick		RI 02886	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	11/02/2018	11/02/2018	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			
	Tara		Zelano		Northbridge Public Schools			
<b>Street Address</b>					<b>Street Address</b>			
1 Clark Rd					21 Crescent St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Smithfield					Whittensville		MA 01588	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	10/31/2018	10/31/2018	0.79

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
			Washington Trust					
<b>Street Address</b>					<b>Street Address</b>			
23 Broad St								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Westerly					RI		02891	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	11/30/2018	11/30/2018	0.77

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
			Washington Trust					
<b>Street Address</b>					<b>Street Address</b>			
23 Broad St								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Westerly					RI		02891	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	11/03/2018	11/03/2018	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			
			RI DENTAL PAC					
<b>Street Address</b>					<b>Street Address</b>			
875 CENTERVILLE ROAD								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
WARWICK					RI		02886	

**SCHEDULE OF EXPENDITURES**

Key #	Full Name of Candidate or Committee	Reporting Period
5,080	ALLAN W FUNG	From: 10/30/2018 To: 12/03/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/06/2018		Campaign Expenditure	Advertising	\$1,551.04

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Advantage Direct		
Street Address			City	State	Zip
2303 14th St Suite 414			Washington	DC	20009

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/06/2018		Campaign Expenditure	Advertising	\$971.08

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Advantage Direct		
Street Address			City	State	Zip
2303 14th St Suite 414			Washington	DC	20009

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/07/2018		Campaign Expenditure	Advertising	\$2,262.24

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Advantage Direct		
Street Address			City	State	Zip
2303 14th St Suite 414			Washington	DC	20009

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/08/2018		Campaign Expenditure	Advertising	\$1,555.64

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Advantage Direct		
Street Address			City	State	Zip
2303 14th St Suite 414			Washington	DC	20009

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10381	11/02/2018		Campaign Expenditure	Fundraising Expenses	\$1,064.66

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			All the Answers		
Street Address			City	State	Zip
60 Alhambra Road, Suite 4			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/06/2018		Campaign Expenditure	Office Equipment & Supplies	\$13.90

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amazon.com	
Street Address	City	State	Zip	
410 Terry Ave	Seattle	WA	98109	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/09/2018		Campaign Expenditure	Office Equipment & Supplies	\$3.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amazon.com	
Street Address	City	State	Zip	
410 Terry Ave	Seattle	WA	98109	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/10/2018		Campaign Expenditure	Office Equipment & Supplies	\$3.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amazon.com	
Street Address	City	State	Zip	
410 Terry Ave	Seattle	WA	98109	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/22/2018		Campaign Expenditure	Office Equipment & Supplies	\$5.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amazon.com	
Street Address	City	State	Zip	
410 Terry Ave	Seattle	WA	98109	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10394	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Jason		Andoscia	
Street Address	City	State	Zip	
626 Smithfield Rd #1204	North Providence	RI	02904	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/02/2018		Campaign Expenditure	Food, Beverages and Meals	\$35.70

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Arooga's Restaurant	
Street Address	City	State	Zip	
615 Greenwich Ave	Warwick	RI	02886	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/02/2018		Campaign Expenditure	Food, Beverages and Meals	\$42.22

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Arooga's Restaurant		
Street Address			City	State	Zip
615 Greenwich Ave			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1812	11/06/2018		Campaign Expenditure	Food, Beverages and Meals	\$200.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Asia Grille		
Street Address			City	State	Zip
622 George Washington Hwy			Lincoln	RI	02865

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10388	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$3,500.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Andrew		Augustus		
Street Address			City	State	Zip
14 Hampden Rd			Bristol	RI	02809

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/02/2018		Campaign Expenditure	Fundraising Expenses	\$15.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			AuthNet Gateway		
Street Address			City	State	Zip
1295 Charleston Road			Mountain View	CA	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10385	11/16/2018		Campaign Expenditure	Fundraising Expenses	\$3,119.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10399	11/30/2018		Campaign Expenditure	Consultant & Professional Services	\$472.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Carlini, Mancini & Barbieri PC		
Street Address			City	State	Zip
PO Box 207			Exeter	RI	02822

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10383	11/08/2018		Campaign Expenditure	Consultant & Professional Services	\$536.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Carlini, Mancini & Barbieri PC		
Street Address			City	State	Zip
PO Box 207			Exeter	RI	02822

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10392	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,500.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Nicholas		Caruolo		
Street Address			City	State	Zip
30 Juniper Dr			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/09/2018		Campaign Expenditure	Food, Beverages and Meals	\$63.40

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Chelo's Beef Hearth		
Street Address			City	State	Zip
1275 Reservoir Ave			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/05/2018		Campaign Expenditure	Food, Beverages and Meals	\$72.63

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Chick-Fil-A		
Street Address			City	State	Zip
1500 Bald Hill Rd			Warwick	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/16/2018		Campaign Expenditure	Food, Beverages and Meals	\$10.29

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Chick-Fil-A		
Street Address			City	State	Zip
1500 Bald Hill Rd			Warwick	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/16/2018		Campaign Expenditure	Office Equipment & Supplies	\$800.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CMDI		
Street Address			City	State	Zip
1593 Spring Hill Road, Suite 400			Tysons Corner	VA	22182

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10387	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$2,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Mark	J.	Collins	
Street Address	City	State	Zip	
98 Turner Avenue	Cranston	RI	02920	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/30/2018		Campaign Expenditure	Other	\$270.60

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Committee for Allan Fung	
Street Address	City	State	Zip	
Po Box 8542	Cranston	RI	02920	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/05/2018		Campaign Expenditure	Consultant & Professional Services	\$12,837.66

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Convergence Media, LLC	
Street Address	City	State	Zip	
PO Box 711024	Herndon	VA	20171	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/05/2018		Campaign Expenditure	Advertising	\$9,652.25

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Convergence Media, LLC	
Street Address	City	State	Zip	
PO Box 711024	Herndon	VA	20171	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/05/2018		Campaign Expenditure	Advertising	\$4,176.08

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Convergence Media, LLC	
Street Address	City	State	Zip	
PO Box 711024	Herndon	VA	20171	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/05/2018		Campaign Expenditure	Advertising	\$2,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Convergence Media, LLC	
Street Address	City	State	Zip	
PO Box 711024	Herndon	VA	20171	



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	10/31/2018		Campaign Expenditure	Advertising	\$13,931.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Convergence Media, LLC		
Street Address			City	State	Zip
PO Box 711024			Herndon	VA	20171

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	10/31/2018		Campaign Expenditure	Advertising	\$6,677.79

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Convergence Media, LLC		
Street Address			City	State	Zip
PO Box 711024			Herndon	VA	20171

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/06/2018		Campaign Expenditure	Advertising	\$4,971.34

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Convergence Media, LLC		
Street Address			City	State	Zip
PO Box 711024			Herndon	VA	20171

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
ACH	11/06/2018		Campaign Expenditure	Advertising	\$7,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Convergence Media, LLC		
Street Address			City	State	Zip
PO Box 711024			Herndon	VA	20171

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1808	11/06/2018		Campaign Expenditure	Consultant & Professional Services	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Aurelia		Corsini		
Street Address			City	State	Zip
			Cranston	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10396	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$750.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Hillary		Costa		
Street Address			City	State	Zip
81 Carmen St			Cranston	RI	02910

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/18/2018		Campaign Expenditure	Office Equipment & Supplies	\$511.36

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cox Communications		
Street Address			City	State	Zip
Kilvert St			West Warwick	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1811	11/06/2018		Campaign Expenditure	Travel & Lodging	\$335.61

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Crowne Plaza		
Street Address			City	State	Zip
801 Greenwich Ave			Warwick	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	10/30/2018		Campaign Expenditure	Office Equipment & Supplies	\$17.15

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CVS		
Street Address			City	State	Zip
176 Hillside Rd			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/02/2018		Campaign Expenditure	Consultant & Professional Services	\$45.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cyber Technical		
Street Address			City	State	Zip
117 Metro Center Boulevard			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	12/03/2018		Campaign Expenditure	Consultant & Professional Services	\$45.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cyber Technical		
Street Address			City	State	Zip
117 Metro Center Boulevard			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/05/2018		Campaign Expenditure	Food, Beverages and Meals	\$51.78

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Delizioso Deli		
Street Address			City	State	Zip
1288 Oaklawn Ave			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/06/2018		Campaign Expenditure	Food, Beverages and Meals	\$10.52

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Dunkin Donuts		
Street Address			City	State	Zip
1678 Post Rd			Warwick	Ri	02888

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/02/2018		Campaign Expenditure	Bank Fees	\$15.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Elavon East Commerce Solutions		
Street Address			City	State	Zip
7300 Chapman Hwy.			Knoxville	TN	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	12/03/2018		Campaign Expenditure	Bank Fees	\$15.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Elavon East Commerce Solutions		
Street Address			City	State	Zip
7300 Chapman Hwy.			Knoxville	TN	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/09/2018		Campaign Expenditure	Food, Beverages and Meals	\$76.15

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Frank Pepe's Pizza		
Street Address			City	State	Zip
21 Universal Blvd			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10395	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Tyler		Hoskins		
Street Address			City	State	Zip
208 Seaview Ave			Swansea	MA	02777

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10382	11/01/2018		Campaign Expenditure	Advertising	\$23,757.53

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Majority Strategies		
Street Address			City	State	Zip
135 Professional Drive Ste 104			Pointe Verde Beach	FL	32082

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10391	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$400.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	JOHN	R	PAGLIARINI		
Street Address			City	State	Zip
230 CUMBERLAND ROAD			WARWICK	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10390	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,600.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Steven		Paiva	Jr	
Street Address			City	State	Zip
40 Water St			Rehoboth	MA	02769

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/06/2018		Campaign Expenditure	Food, Beverages and Meals	\$136.54

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Panera		
Street Address			City	State	Zip
160 Old Tower Hill Rd			Wakefield	RI	02879

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/01/2018		Campaign Expenditure	Employee Services	\$55.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex EIB		
Street Address			City	State	Zip
501 Wampanoag Trail			East Providence	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/01/2018		Campaign Expenditure	Employee Services	\$3,813.94

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex TPS		
Street Address			City	State	Zip
501 Wampanoag Trail			East Providence	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	10/31/2018		Campaign Expenditure	Consultant & Professional Services	\$8,296.68

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex, Inc		
Street Address			City	State	Zip
501 Wampanoag Trail			East Providence	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/05/2018		Campaign Expenditure	Food, Beverages and Meals	\$35.48

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Pizza King		
Street Address			City	State	Zip
1800 Post Rd #6			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10393	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,500.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Brooke		Race		
Street Address			City	State	Zip
27 Chapin Ave			Rocky Hill	CT	06067

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10389	11/15/2018		Campaign Expenditure	Consultant & Professional Services	\$1,350.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Paula	A.	Smith		
Street Address			City	State	Zip
38 Firglade Drive			Cranston	RI	02920

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/05/2018		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Square		
Street Address			City	State	Zip
1455 Market Street, Suite 600			San Francisco	CA	94103

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	12/03/2018		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Square		
Street Address			City	State	Zip
1455 Market Street, Suite 600			San Francisco	CA	94103

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/06/2018		Campaign Expenditure	Office Equipment & Supplies	\$50.54

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Staples		
Street Address			City	State	Zip
1800 Post Road			Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/02/2018		Campaign Expenditure	Office Equipment & Supplies	\$15.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Staples	
Street Address	City	State	Zip	
1800 Post Road	Warwick	RI	02886	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/07/2018		Campaign Expenditure	Food, Beverages and Meals	\$13.01

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Starbucks	
Street Address	City	State	Zip	
4800 Bald Hill Rd	Warwick	RI	02886	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/16/2018		Campaign Expenditure	Food, Beverages and Meals	\$5.88

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Starbucks	
Street Address	City	State	Zip	
4800 Bald Hill Rd	Warwick	RI	02886	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/18/2018		Campaign Expenditure	Food, Beverages and Meals	\$5.88

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Starbucks	
Street Address	City	State	Zip	
1 Chapel View Blvd	Cranston	RI	02920	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/21/2018		Campaign Expenditure	Food, Beverages and Meals	\$5.03

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Starbucks	
Street Address	City	State	Zip	
1 Chapel View Blvd	Cranston	RI	02920	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/05/2018		Campaign Expenditure	Food, Beverages and Meals	\$48.72

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Stop & Shop	
Street Address	City	State	Zip	
575 Greenwich Ave	Warwick	RI	02888	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/02/2018		Campaign Expenditure	Food, Beverages and Meals	\$50.86

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Stop & Shop		
Street Address			City	State	Zip
575 Greenwich Ave			Warwick	RI	02888

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/02/2018		Campaign Expenditure	Food, Beverages and Meals	\$33.23

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Stop & Shop		
Street Address			City	State	Zip
575 Greenwich Ave			Warwick	RI	02888

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/01/2018		Campaign Expenditure	Bank Fees	\$6.56

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Targeted Victory		
Street Address			City	State	Zip
1100 Wilson Blvd 10th Floor			Arlington	VA	22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	10/31/2018		Campaign Expenditure	Bank Fees	\$20.09

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Targeted Victory		
Street Address			City	State	Zip
1100 Wilson Blvd 10th Floor			Arlington	VA	22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	10/30/2018		Campaign Expenditure	Bank Fees	\$18.45

**Purpose of Expenditure**

Credit Card processing fee

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Targeted Victory		
Street Address			City	State	Zip
1100 Wilson Blvd 10th Floor			Arlington	VA	22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/02/2018		Campaign Expenditure	Bank Fees	\$89.57

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/05/2018		Campaign Expenditure	Bank Fees	\$18.86

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/09/2018		Campaign Expenditure	Bank Fees	\$0.20

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/06/2018		Campaign Expenditure	Bank Fees	\$34.67

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/08/2018		Campaign Expenditure	Bank Fees	\$0.53

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/07/2018		Campaign Expenditure	Bank Fees	\$9.16

**Purpose of Expenditure**

Credit Card processing fees

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Targeted Victory	
Street Address			City	State Zip
1100 Wilson Blvd 10th Floor			Arlington	VA 22209



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/01/2018		Campaign Expenditure	Food, Beverages and Meals	\$156.31

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			The Cooked Goose		
Street Address			City	State	Zip
92 Watch Hill Rd			Westerly	RI	02891

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/12/2018		Campaign Expenditure	Food, Beverages and Meals	\$177.10

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Twin Oaks		
Street Address			City	State	Zip
100 Sabra St			Cranston	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/08/2018		Campaign Expenditure	Fundraising Expenses	\$150.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			US Postal Service		
Street Address			City	State	Zip
Midway Plaza			Cranston	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/08/2018		Campaign Expenditure	Fundraising Expenses	\$150.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			US Postal Service		
Street Address			City	State	Zip
Midway Plaza			Cranston	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/03/2018		Campaign Expenditure	Fundraising Expenses	\$3.95

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			US Postal Service		
Street Address			City	State	Zip
Midway Plaza			Cranston	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10397	11/30/2018		Campaign Expenditure	Refunds/Reimbursements	\$171.72

**Purpose of Expenditure**

Reiimbursement for food cost

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Andrew		Vargas		
Street Address			City	State	Zip
125 Providence Street Apt S405			West Warwick	RI	02893

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Debit Card	11/12/2018		Campaign Expenditure	Office Equipment & Supplies	\$170.70

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Verizon	
Street Address	City	State	Zip	
P.O. Box 15124	Albany	NY	12212	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	10/31/2018		Campaign Expenditure	Bank Fees	\$17.85

**Purpose of Expenditure**

Excess Transaction Fee

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Washington Trust	
Street Address	City	State	Zip	
23 Broad St	Westerly	RI	02891	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Direct	11/30/2018		Campaign Expenditure	Bank Fees	\$40.00

**Purpose of Expenditure**

Maintenance Fee

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Washington Trust	
Street Address	City	State	Zip	
23 Broad St	Westerly	RI	02891	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	10/30/2018		Refund of Contribution	Other	\$500.00

**Purpose of Expenditure**

Duplicate Online donation in error

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Chutze		Chou	
Street Address	City	State	Zip	
1200 Washington St Apt 317	Boston	MA	02118	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	10/30/2018		Refund of Contribution	Other	\$250.00

**Purpose of Expenditure**

Duplicate Online donation in error

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Michael		Kaprielein	
Street Address	City	State	Zip	
94 Medway St #3	Providence	RI	02906	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	11/30/2018		Refund of Contribution	Other	\$500.00

**Purpose of Expenditure**

Return of Over Contribution

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Peter		Picknelly	
Street Address			City	State Zip
330 Park Ave			Springfield	MA 01106

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10386	11/15/2018		Refund of Contribution	Other	\$100.00

**Purpose of Expenditure**

Return of Overcontribution

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Thomas	N	Whipple	III
Street Address			City	State Zip
24 Greenwood Ln			Lincoln	RI 02865

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
10384	11/08/2018		Repayment of Loan	Loans Payable	\$25,000.00

**Purpose of Expenditure****Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Allan	W	Fung	
Street Address			City	State Zip
1581 Phenix Ave			Cranston	RI 02921