

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#
Patricia L. Morgan	5974

Street Address	City/Town, State and Zip Code
411 WAKEFIELD STREET	WEST WARWICK, RI 02893

Mailing Address (if different)	City/Town, State and Zip Code
--------------------------------	-------------------------------

Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 828-4831	(401) 828-4831		REP-MORGAN@RILEGSLATURE.GOV

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

Reporting Period (Dates):	Period Beginning: 09/05/2018	Period Ending: 10/09/2018
---------------------------	------------------------------	---------------------------

SUMMARY OF ACTIVITY FOR PERIOD

1. Beginning Cash Balance	\$ 39,699.59
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	1,119.00
3. Political Parties	0
4. Political Action Committees	0
5. Loan Proceeds	0
6. Payroll Check off	0
7. Interest Received	0
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	0
14. Returned Checks	0
b. Other:	0
	0
	0
	0
3. Total Cash	40,818.59
4. Cash Disbursements	
a. Aggregate Expenses	(350.36)
b. Campaign Expenses	25,795.53
c. Repayment of Loans	0
d. Account Payable Repayments	0
e. Other	0

4. Cash Disbursements, continued	
f. Other Disbursements	0
5. Ending Cash Balance	\$ 15,373.42

CAMPAIGN FUND STATUS

6. Report of In-Kind Contributions	0
7. Cash	\$ 15,373.42
8. Other Assets	
	0
	0
	0
9. Total Assets	\$ 15,373.42

LIABILITIES AND FUND BALANCE

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	97,786.97
c. Other Liabilities	
	0
	0
11. Total Liabilities	97,786.97
12. Total Fund Balance	\$(82,413.55)
13. Total Liability / Fund Balance	15,373.42

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

Key # 5,974	Full Name of Candidate or Committee Patricia L. Morgan	Reporting Period From: 09/05/2018 To: 10/09/2018
-----------------------	--	---

Item	Transaction Type Check	Contribution Type Individual	Receipt Date 09/11/2018	Deposit Date 09/11/2018	Contribution Amount 50.00
-------------	----------------------------------	--	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name Jessica	MI	Last Name or PAC/Party Committee Name Baker	Suffix	Employer Name AAA (Triple A)		
Street Address 361 Shawomet Ave					Street Address 110 Royal Little Drive		
City Warwick			State RI	Zip 02889	City Providence	State RI	Zip

Item	Transaction Type Check	Contribution Type Individual	Receipt Date 09/12/2018	Deposit Date 09/12/2018	Contribution Amount 300.00
-------------	----------------------------------	--	-----------------------------------	-----------------------------------	--------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name Walter	MI	Last Name or PAC/Party Committee Name Cardi	Suffix Jr	Employer Name Cardi's Furniture		
Street Address 1 Furniture Way					Street Address 1 Furniture Way		
City Swansea			State MA	Zip 02777	City Swansea	State MA	Zip

Item	Transaction Type Check	Contribution Type Individual	Receipt Date 09/07/2018	Deposit Date 09/07/2018	Contribution Amount 25.00
-------------	----------------------------------	--	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name Todd	MI	Last Name or PAC/Party Committee Name Davis	Suffix	Employer Name requested		
Street Address PO Box 7803 - Diamond Hill Rd					Street Address Diamond Hill Rd		
City Cumberland			State RI	Zip 02864	City Cumberland	State RI	Zip 02864

Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date 09/05/2018	Deposit Date 09/05/2018	Contribution Amount 25.00
-------------	--	--	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name Christopher	MI	Last Name or PAC/Party Committee Name Dulude	Suffix	Employer Name goodwill industries of ri		
Street Address 65 Broadway					Street Address 100 Houghton Street		
City Woonsocket			State RI	Zip 02895	City Providence	State RI	Zip 02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	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		Ellis		requested			
Street Address					Street Address			
610 S County Trail					610 S County Trail			
City					City		State	Zip
N Kingstown					N. Kingstown		RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/08/2018	09/08/2018	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			
	Sharon		Geving		Retired			
Street Address					Street Address			
303 3rd Avenue					303 3rd Avenue			
City					City		State	Zip
Woonsocket					Woonsocket		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	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			
	Sidney		Goldman		Greylawn Foods			
Street Address					Street Address			
2 Circuit Dr					2032 Plainfield Pike			
City					City		State	Zip
Cranston					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	49.00

In Kind/Other Receipts Description

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Linda		Goodspeed		retired			
Street Address					Street Address			
35 King Philip Road					35 King Philip Road			
City					City		State	Zip
Pawucket					Pawucket		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/05/2018	09/05/2018	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			
	Jean		Halvorsen		Retired			
Street Address					Street Address			
44 Highland Av.					44 Highland Av.			
City					City		State	Zip
Johnston					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/08/2018	09/08/2018	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		
	Rosalie		Joannou		Retired		
Street Address					Street Address		
2 Bishop Court					2 Bishop Court		
City			State	Zip	City	State	Zip
Bethpage			NY	11714	Bethpage	NY	11714

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	30.00

In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul		Leblanc		retired		
Street Address					Street Address		
19 Navarre St					19 Navarre St		
City			State	Zip	City	State	Zip
W Warwick			RI	02893	West Warwick	Ri	02893

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/07/2018	09/07/2018	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		
	Donna		Menard		Retired		
Street Address					Street Address		
356 Whaley Hollow Road					356 Whaley Hollow Road		
City			State	Zip	City	State	Zip
Coventry			RI	02816	Coventry	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/11/2018	09/11/2018	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		
	Debra		Murphy		self		
Street Address					Street Address		
69 Keel Ave					69 Keel Ave		
City			State	Zip	City	State	Zip
Jamestown			RI	02835	Jamestown	RI	02835

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	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		O'Connell		requested		
Street Address					Street Address		
144 Lloyd Rd					144 Lloyd Rd		
City			State	Zip	City	State	Zip
Saunderstown			RI	02874	Saunderstown	RI	02874

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	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			
	Simeone	S	Parente		Requested			
Street Address					Street Address			
11 Lauren Court					11 Lauren Court			
City					City		State Zip	
Cranston					Cranston		RI 02921	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	09/07/2018	09/07/2018	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			
	Elizabeth		Pedro		Retired			
Street Address					Street Address			
15 Pearl St					15 Pearl St			
City					City		State Zip	
Portsmouth					Portsmouth		RI 02871	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	09/10/2018	09/10/2018	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			
	Marc		Rodriquez		Gilbane			
Street Address					Street Address			
129 Flat River Rd					7 Jackson Wlkwy			
City					City		State Zip	
Coventry					Providence		RI 02903	

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period	
5,974	Patricia L. Morgan	From: 09/05/2018	To: 10/09/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Bk Fee Adj	09/10/2018		Aggregate Expenditure	Refunds/Reimbursements	\$(350.36)

Purpose of Expenditure

CC Bank Fees

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Anedot		
Street Address			City	State	Zip
4017 Buena Vista Suite 109			Dallas	TX	75204

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
239	09/11/2018		Campaign Expenditure	Advertising	\$451.21

Purpose of Expenditure

Volunteer T Shirts

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Advoc8		
Street Address			City	State	Zip
500 Penn St, NE			Washington	DC	20002

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Bk Fee Adj	09/10/2018		Campaign Expenditure	Refunds/Reimbursements	\$0.00

Purpose of Expenditure

CC Bank Fees

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Anedot		
Street Address			City	State	Zip
4017 Buena Vista Suite 109			Dallas	TX	75204

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/10/2018		Campaign Expenditure	Bank Fees	\$32.50

Purpose of Expenditure

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Anedot		
Street Address			City	State	Zip
4017 Buena Vista Suite 109			Dallas	TX	75204

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
241	10/03/2018		Campaign Expenditure	Advertising	\$1,625.00

Purpose of Expenditure

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Big Dog Strategies		
Street Address			City	State	Zip
141 Elm St., Suite 500			Buffalo	NY	14203

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
233	09/13/2018		Campaign Expenditure	Advertising	\$3,950.00

Purpose of Expenditure

Air Time- Radio

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cumulus-WPRO AM		
Street Address			City	State	Zip
3651 Momentum Place			Chicago	IL	60689

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
240	09/11/2018		Campaign Expenditure	Advertising	\$3,795.96

Purpose of Expenditure

Printing Advertisements

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			i360 LLC		
Street Address			City	State	Zip
29374 Network Place			Chicago	IL	60673

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/10/2018		Campaign Expenditure	Rent & Utilities	\$450.00

Purpose of Expenditure

Sept rent

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Lacroix Properties		
Street Address			City	State	Zip
PO Box 1271			W Warwick	RI	02893

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
Wire Trsfer	09/10/2018		Campaign Expenditure	Advertising	\$15,000.00

Purpose of Expenditure

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Mentzer Media		
Street Address			City	State	Zip
210 W. Pennsylvania Ave ST 250			Towson	MD	21204

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	10/04/2018		Campaign Expenditure	Rent & Utilities	\$442.86

Purpose of Expenditure

Sept usage

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			National Grid		
Street Address			City	State	Zip
PO 11739			Newark	NJ	07101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/14/2018		Campaign Expenditure	Office Equipment & Supplies	\$48.00

Purpose of Expenditure

Postage

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			US Postal Service		
Street Address			City	State	Zip
100 Washington Street			W Warwick	RI	02893
