

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#
SPENCER E DICKINSON	6133

Street Address	City/Town, State and Zip Code
422 B SOUTH ROAD	WAKEFIELD, RI 02879

Mailing Address (if different)	City/Town, State and Zip Code
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Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 782-2484	(401) 741-5148		DICKINSON@RICONNECT.COM

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

Reporting Period (Dates):	Period Beginning: 04/01/2018	Period Ending: 06/30/2018
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SUMMARY OF ACTIVITY FOR PERIOD

1. Beginning Cash Balance	\$ 3,390.49
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	700.00
3. Political Parties	0
4. Political Action Committees	0
5. Loan Proceeds	35,000.00
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	39,090.49
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	29,174.83
c. Repayment of Loans	0
d. Account Payable Repayments	0
e. Other	0

4. Cash Disbursements, continued	
f. Other Disbursements	0
	0
	0
5. Ending Cash Balance	\$ 9,915.66

CAMPAIGN FUND STATUS

6. Report of In-Kind Contributions	0
7. Cash	\$ 9,915.66
8. Other Assets	
	0
	0
	0
9. Total Assets	\$ 9,915.66

LIABILITIES AND FUND BALANCE

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	68,000.72
c. Other Liabilites	
	0
	0
11. Total Liabilities	68,000.72
12. Total Fund Balance	\$(58,085.06)
13. Total Liability / Fund Balance	9,915.66

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 # 6,133	Full Name of Candidate or Committee SPENCER E DICKINSON	Reporting Period From: 04/01/2018 To: 06/30/2018
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Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date 06/30/2018	Deposit Date	Contribution Amount 50.00
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In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Taylor		Garland		Symphonic Distribution		
Street Address					Street Address		
5001 W. Dickens Ave.					707 N. Franklin St.		
City			State	Zip	City	State	Zip
Tampa			FL	33629	Tampa	FL	33602

Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date 06/03/2018	Deposit Date	Contribution Amount 500.00
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In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Laurence		Hall		Retired		
Street Address					Street Address		
171 Trimtown Rd					171 Trimtown Rd		
City			State	Zip	City	State	Zip
North Scituate			RI	02857	Nprth Scituate	RI	02857

Item	Transaction Type Check	Contribution Type Individual	Receipt Date 06/03/2018	Deposit Date	Contribution Amount 100.00
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In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Dean		Lees		Retired		
Street Address					Street Address		
535 Angell Road					535 Angell Road		
City			State	Zip	City	State	Zip
Lincoln			RI	02855	Lincoln	RI	02855

Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date 06/03/2018	Deposit Date	Contribution Amount 50.00
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In Kind/Other Receipts Description

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Sandra		McCulloch		Retired		
Street Address					Street Address		
70 Longfellow Rd					70 Longfellow Rd		
City			State	Zip	City	State	Zip
East Greenwich			RI	02818	East Greenwich	RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Loan	Loan Proceeds	06/25/2018	06/25/2018	30,000.00

In Kind/Other Receipts Description

ck#3077

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	SPENCER	E	DICKINSON		MB CONSTRUCTION		
Street Address					Street Address		
422B SOUTH ROAD					422B SOUTH ROAD		
City		State	Zip	City		State	Zip
WAKEFIELD		RI	02879	WAKEFIELD		RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Loan	Loan Proceeds	04/06/2018	04/06/2018	5,000.00

In Kind/Other Receipts Description

ck 3049

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	SPENCER	E	DICKINSON		MB CONSTRUCTION		
Street Address					Street Address		
422B SOUTH ROAD					422B SOUTH ROAD		
City		State	Zip	City		State	Zip
WAKEFIELD		RI	02879	WAKEFIELD		RI	02879

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Rev. 3/01

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period
6,133	SPENCER E DICKINSON	From: 04/01/2018 To: 06/30/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1033	06/11/2018		Campaign Expenditure	Advertising	\$100.00

Purpose of Expenditure

Bumper stickers

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Accumen Printing	

Street Address	City	State	Zip
2905 Post Rd	Warwick	RI	02886

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1031	06/05/2018		Campaign Expenditure	Consultant & Professional Services	\$150.00

Purpose of Expenditure

Website Maint.

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Frame PC	

Street Address	City	State	Zip
52 Main St	Wakefield	RI	02879

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1029	04/24/2018		Campaign Expenditure	Consultant & Professional Services	\$90.00

Purpose of Expenditure

Webpage consulting

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Jordan Frame	

Street Address	City	State	Zip
52 Main St	Wakefield	RI	02879

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1035	06/25/2018		Campaign Expenditure	Advertising	\$21,500.00

Purpose of Expenditure

Billboards

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Lamar Advertising	

Street Address	City	State	Zip
360 Warren Ave	East Providence	RI	02914

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1027	04/05/2018		Campaign Expenditure	Advertising	\$4,484.31

Purpose of Expenditure

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			PROVIDENCE JOURNAL	
Street Address			City	State Zip
75 FOUNTAIN ST			PROVIDENCE	RI

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1028	04/23/2018		Campaign Expenditure	Advertising	\$2,120.52

Purpose of Expenditure**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			PROVIDENCE JOURNAL	
Street Address			City	State Zip
75 FOUNTAIN ST			PROVIDENCE	RI

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1030	05/31/2018		Campaign Expenditure	Advertising	\$655.00

Purpose of Expenditure

Yard signs

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Reynolds DeWalt	
Street Address			City	State Zip
186 DuChaine Blvd			New Bedford	MA 02745

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1034	06/17/2018		Campaign Expenditure	Advertising	\$50.00

Purpose of Expenditure

Photo

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Riverside Studio	
Street Address			City	State Zip
7 Riverside Lane			Ellsworth	ME 04605

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1032	06/05/2018		Campaign Expenditure	Advertising	\$25.00

Purpose of Expenditure

Voter list disc

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			State of RI	
Street Address			City	State Zip
148 West River Street			Providence	RI 02904