

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#
MICHAEL GEORGE RILEY	6846

Street Address	City/Town, State and Zip Code
444 OCEAN ROAD	NARRAGANSETT, RI 02882

Mailing Address (if different)	City/Town, State and Zip Code
25 WILDFIELD FARM RD	NARRAGANSETT, RI 02882

Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 789-0689	(401) 284-0358		MGRILEY1929@YAHOO.COM

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

Reporting Period (Dates):	Period Beginning: 07/01/2018	Period Ending: 10/08/2018
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SUMMARY OF ACTIVITY FOR PERIOD

1. Beginning Cash Balance	\$ 0
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	0
3. Political Parties	0
4. Political Action Committees	0
5. Loan Proceeds	200.00
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
3. Total Cash	200.00
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	11.99
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	\$ 188.01

CAMPAIGN FUND STATUS

6. Report of In-Kind Contributions	0
7. Cash	\$ 188.01
8. Other Assets	0
	0
	0
9. Total Assets	\$ 188.01

LIABILITIES AND FUND BALANCE

10. Liabilities	
a. Accounts Payable	\$ 967.31
b. Loans Payable	200.00
c. Other Liabilities	0
	0
11. Total Liabilities	1,167.31
12. Total Fund Balance	\$(979.30)
13. Total Liability / Fund Balance	188.01

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 # 6,846	Full Name of Candidate or Committee MICHAEL GEORGE RILEY	Reporting Period From: 07/01/2018 To: 10/08/2018
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Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Loan	Loan Proceeds	07/31/2018	07/31/2018	200.00

In Kind/Other Receipts Description

Individual loan from candidate, Michael G. Riley to open Campaign Bank Account (Riley for Treasurer)

Contributor Information

Employer Data

Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	MICHAEL	G.	RILEY		COASTAL MANAGEMENT GROUP, LLC.		
Street Address					Street Address		
25 WILDFIELD FARM ROAD					PIER MARKET PLACE, 34A		
City			State	Zip	City	State	Zip
NARRAGANSETT			RI	02882	NARRAGANSETT	RI	02882

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period	
6,846	MICHAEL GEORGE RILEY	From: 07/01/2018	To: 10/08/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	09/24/2018		Account Payable	Advertising	\$967.31

Purpose of Expenditure

Signs

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Michael	G	Riley		

Street Address	City	State	Zip
25 Wildfield Farm Rd.	Narragansett	RI	02882

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/14/2018		Campaign Expenditure	Bank Fees	\$11.99

Purpose of Expenditure

Check Book and Service Charge Bank

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Citizens Bank		

Street Address	City	State	Zip
P.O. Box 7000	Providence	RI	02940