

**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#
GINA M. RAIMONDO	6965

Street Address	City/Town, State and Zip Code
PO BOX 40794	PROVIDENCE, RI 02940

Mailing Address (if different)	City/Town, State and Zip Code
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Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 435-3611	(401) 435-3611		gina@ginaraimondo.com

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

Reporting Period (Dates):	Period Beginning: 04/01/2017	Period Ending: 06/30/2017
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**SUMMARY OF ACTIVITY FOR PERIOD**

1. Beginning Cash Balance	\$ 2,221,014.35
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	530,459.89
3. Political Parties	75.00
4. Political Action Committees	16,275.00
5. Loan Proceeds	0
6. Payroll Check off	0
7. Interest Received	1,254.54
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	(1,015.00)
14. Returned Checks	0
b. Other:	0
	0
	0
	0
3. Total Cash	2,768,063.78
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	100,500.79
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	\$ 2,667,562.99

**CAMPAIGN FUND STATUS**

6. Report of In-Kind Contributions	0
7. Cash	\$ 2,667,562.99
8. Other Assets	0
	0
	0
9. Total Assets	\$ 2,667,562.99

**LIABILITIES AND FUND BALANCE**

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	0
c. Other Liabilites	0
	0
	0
11. Total Liabilities	0
12. Total Fund Balance	\$ 2,667,562.99
13. Total Liability / Fund Balance	2,667,562.99

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> 6,965	<b>Full Name of Candidate or Committee</b> GINA M. RAIMONDO	<b>Reporting Period</b> <b>From:</b> 04/01/2017 <b>To:</b> 06/30/2017
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<b>Item</b>	<b>Transaction Type</b> Check	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 05/22/2017	<b>Deposit Date</b>	<b>Contribution Amount</b> 15.00
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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		
	Leila		Abelow		Retired		
<b>Street Address</b>					<b>Street Address</b>		
32 James St, Apt 1					32 James St, Apt 1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brookline			MA	02446	Brookline	MA	02446

<b>Item</b>	<b>Transaction Type</b> Credit/Debit Card	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 04/26/2017	<b>Deposit Date</b>	<b>Contribution Amount</b> 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		
	Catha		Abrahams		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2120 Harbourside Dr					2120 Harbourside Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Longboat Key			FL	34228	Longboat Key	FL	34228

<b>Item</b>	<b>Transaction Type</b> Credit/Debit Card	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 04/01/2017	<b>Deposit Date</b>	<b>Contribution Amount</b> 15.00
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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		
	Leslie		Abramowitz		Commonwealth of Massachusetts		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 35							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Richmond			MA	01254	Boston	MA	

<b>Item</b>	<b>Transaction Type</b> Credit/Debit Card	<b>Contribution Type</b> Individual	<b>Receipt Date</b> 04/05/2017	<b>Deposit Date</b>	<b>Contribution Amount</b> 25.00
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**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Theodore	C.	Achilles	Jr.	AMZ Renaissance Foundation		
<b>Street Address</b>					<b>Street Address</b>		
30 Luzon Ave					PO Box 603253		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906-4612	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Benjamin	M.	Achin		UMass Medical School		
<b>Street Address</b>					<b>Street Address</b>		
7 Como Dr					55 N Lake Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Attleboro			MA	02703	Worcester	MA	01655

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		60.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Caroline	A.	Adams		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1566 Lisa Lane					1566 Lisa Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Redlands			CA	92374	Redlands	CA	92374

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		Adams		Millwork One		
<b>Street Address</b>					<b>Street Address</b>		
6 Sagamore Rd					60 Kenney Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sagamore Beach			MA	02562	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Antonio		Afonso	Jr.	Moses Afonso Ryan LLP		
<b>Street Address</b>					<b>Street Address</b>		
51 Rawson Road					160 Westminster St, Suite 400		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Glenn	R.	Ahlborg		Ahlborg Construction Corp.		
<b>Street Address</b>					<b>Street Address</b>		
99 Briarcliff Ave					21 College Hill Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889-6835	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/24/2017		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			
	Irfan		Ahmad		Rhode Island Medicine, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
10 Garrett Rd					20 Cumberland Hill Rd			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
No. Attleboro					Woonsocket		RI 02895-4854	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		7.15

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Helen		Aiello		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
66 Scenic View Dr					66 Scenic View Dr			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Middletown					Middletown		CT 06457	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/16/2017		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			
	Peter	R.	Aiello		CD Puleo Realty			
<b>Street Address</b>					<b>Street Address</b>			
1 King Phillip Rd					549 Branch Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Lincoln					Providence		RI 02904	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Beth		Alberts		San Francisco Unified School District			
<b>Street Address</b>					<b>Street Address</b>			
200 Edgehill Way					555 Franklin St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
San Francisco					San Francisco		CA 94102	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/20/2017		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			
	Theresa		Alessi		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
1745 E. Hallandale Beach Blvd								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Hallandale Beach					FL 33009-4661			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Frances	M.	Alexakos	Ph.D.	Roger Williams University		
<b>Street Address</b>					<b>Street Address</b>		
249 Woodruff Ave					1 Old Ferry Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879-3547	Bristol	RI	02809-2923

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Tina		Alexander		Tina Alexander, Consultant		
<b>Street Address</b>					<b>Street Address</b>		
1200 West Ave					1200 West Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Miami Beach			FL	33139	Miami Beach	FL	33139

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Sonia	A.	Alland		Retired		
<b>Street Address</b>					<b>Street Address</b>		
129 W. 22nd St					129 W. 22nd St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10011	New York	NY	10011

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/22/2017		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		
	Herbert	A.	Allen	III	Allen & Company		
<b>Street Address</b>					<b>Street Address</b>		
711 5th Ave					711 5th Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10022-3168	New York	NY	10022-3168

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/11/2017		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		
	Jennifer		Allred		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
3310 S. Oakwood St					3310 S. Oakwood St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Salt Lake City			UT	84109	Salt Lake City	UT	84109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	Isell		Almanzar		Manny's Trucking, LLC			
<b>Street Address</b>					<b>Street Address</b>			
70 Mowry St					70 Mowry St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861-1257

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/11/2017		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			
	Roger		Altman		Evercore Partners			
<b>Street Address</b>					<b>Street Address</b>			
55 E 52nd St					55 E 52nd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10055-0002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Stephen	D.	Alves		Dorrance Street Financial			
<b>Street Address</b>					<b>Street Address</b>			
34 Sweetbriar Ln					127 Dorrance St, #4			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Stephen	D.	Alves		Dorrance Street Financial			
<b>Street Address</b>					<b>Street Address</b>			
34 Sweetbriar Ln					127 Dorrance St, #4			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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			
	Madeline		Anbinder		Retired			
<b>Street Address</b>					<b>Street Address</b>			
120 Sunset Ave					120 Sunset Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Palm Beach					Palm Beach		FL	33480

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Carolyn	S.	Anders		Retired		
<b>Street Address</b>					<b>Street Address</b>		
4842 Maytime Ln					4842 Maytime Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Culver City			CA	90230	Culver City	CA	90230

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/12/2017		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		
	Ada		Anderson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1218 E. 125 St					1218 E. 125 St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Olathe			KS	66061	Olathe	KS	66061

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Eleanor		Anderson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3374 S. Pioneer St					3374 S. Pioneer St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Salt Lake City			UT	84109	Salt Lake City	UT	84109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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		
	Frann		Anderson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1112 N. Hilton Rd					1112 N. Hilton Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wilmington			DE	19803	Wilmington	DE	19803

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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		
	Frann		Anderson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1112 N. Hilton Rd					1112 N. Hilton Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wilmington			DE	19803	Wilmington	DE	19803



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		Andrade		Carey, Richmond & Viking		
<b>Street Address</b>					<b>Street Address</b>		
152 Rhode Island Ave					2 Corporate Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newport			RI	02840-3341	Middletown	RI	02842

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Tome		Andrade		Universal Wilde		
<b>Street Address</b>					<b>Street Address</b>		
315 Winnisimmet Dr					26 Dartmouth St.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878	Westwood	MA	02090

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		
	Clinton		Aneni		Retired		
<b>Street Address</b>					<b>Street Address</b>		
121 Butler Ave					121 Butler Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Clinton		Aneni		Retired		
<b>Street Address</b>					<b>Street Address</b>		
121 Butler Ave					121 Butler Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Andrew	J	Annaldo		Andrew J. Annaldo, Lobbyist		
<b>Street Address</b>					<b>Street Address</b>		
2 Beloit St					2 Beloit St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	Andrew	J	Annaldo		Andrew J. Annaldo, Lobbyist		
Street Address					Street Address		
2 Beloit St					2 Beloit St		
City		State	Zip	City		State	Zip
Providence		RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Andrew	J	Annaldo		Andrew J. Annaldo, Lobbyist		
Street Address					Street Address		
2 Beloit St					2 Beloit St		
City		State	Zip	City		State	Zip
Providence		RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Ingrid	G.	Ardaya		Disabled		
Street Address					Street Address		
11 North Avenue					11 North Avenue		
City		State	Zip	City		State	Zip
Providence		RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/02/2017		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		
	Ingrid	G.	Ardaya		Disabled		
Street Address					Street Address		
11 North Avenue					11 North Avenue		
City		State	Zip	City		State	Zip
Providence		RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
Street Address					Street Address		
11 North Avenue					11 North Avenue		
City		State	Zip	City		State	Zip
Providence		RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/01/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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		
	Ingrid	G.	Ardaya		Disabled		
<b>Street Address</b>					<b>Street Address</b>		
11 North Avenue					11 North Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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			
	William	R	Ashworth		Vanasse Hangen Brustlin, Inc			
<b>Street Address</b>					<b>Street Address</b>			
36 Riverview Rd					10 Dorrance St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Lawrence	A	Aubin	Sr.	Aubin Corp			
<b>Street Address</b>					<b>Street Address</b>			
1460 Fall River Ave					1460 Fall River Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Seekonk		MA	02771

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Debra	A.	Audette		RI Nurses Institute Middle College			
<b>Street Address</b>					<b>Street Address</b>			
3 Beech Tree Ct					150 Washinton St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	Lila		Aurich		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2413 Hartland St					2413 Hartland St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Hills					West Hills		CA	91307

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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	M.	Avery		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
16 Oak Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Concord							MA	01742-3314

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Ashley	N.	Baccari		Aloisio Insurance Associates, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
157 Hope Street					1232 Mineral Spring Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					No. Providence		RI	02904-4105

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Susanne		Baccari		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
440 Ocean Rd					440 Ocean Rd			
<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	04/10/2017		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			
	Roger		Badeker		Retired			
<b>Street Address</b>					<b>Street Address</b>			
25960 Illinois Creek Rd					25960 Illinois Creek Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Alma					Alma		KS	66401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		7.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Rebecca		Bailey		Northeastern University			
<b>Street Address</b>					<b>Street Address</b>			
17 Forest Glen Rd					360 Huntington Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Reading					Boston		MA	02115

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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			
	Diana		Bain		Environmental Mediation Center			
<b>Street Address</b>					<b>Street Address</b>			
2657 Hemenway Rd					177 Paddy Hill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bridport					Moretown		VT	05660

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Nancy	D.	Bain		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
228 Burdick 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	06/26/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Stephen		Bakios		East Bay Oral Surgery		
<b>Street Address</b>					<b>Street Address</b>		
41 Albert St					2224 Pawtucket Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Portsmouth			RI	02871	East Providence	RI	02914-1716

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Robert	J.	Baldwin		R.B. Homes, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
3 Enzo Dr					42 Shun Pike		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Coventry			RI	02816	Johnston	RI	02919-4513

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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		
	Charlotte	E.	Balint		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2608 Taylor Ave					2608 Taylor Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Longview			WA	98632	Longview	WA	98632

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Gerald	F.	Baluha		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
39 Amberjack Dr							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hendersonville			NC	28792-7222			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Linda		Banche		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
22 Crestwood Dr					22 Crestwood Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Framingham			MA	01701	Framingham	MA	01701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Jennifer	A.	Baptista		Piccerelli, Gilstein & Company		
<b>Street Address</b>					<b>Street Address</b>		
479 Providence St, C1					144 Westminster Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Ernest	P	Baptista	Jr.	Gencorp, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
118 Crothers Ave					16 Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02910	East Greenwich	RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Miles		Barnett		Retired		
<b>Street Address</b>					<b>Street Address</b>		
6037 Ozark Dr					6037 Ozark Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
High Ridge			MO	63049	High Ridge	MO	63049

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/03/2017		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		Barton		John Barton, Self-Employed Consultant		
<b>Street Address</b>					<b>Street Address</b>		
1551 Larimer St, Apt 2701					1551 Larimer St, Apt 2701		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Denver			CO	80202-1638	Denver	CO	80202-1638



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Stephanie	J.	Baton		Hinckley Allen			
<b>Street Address</b>					<b>Street Address</b>			
114 Upton Ave					100 Westminster St, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Margaret		Batschelet		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
11875 W. 85th Ave					11875 W. 85th Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Arvada					Arvada		CO	80005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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			
	Mary	Ann	Baumrind		Baumrind & Baumrind			
<b>Street Address</b>					<b>Street Address</b>			
201 Clinton St, Apt 3					201 Clinton St, Apt 3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					Brooklyn		NY	11201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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			
	Kathleen	J.	Bavelas		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Pratt Lane					56 Pratt Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wolcott					Wolcott		CT	06716

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Matthew	S.	Bavolack		Marcum			
<b>Street Address</b>					<b>Street Address</b>			
201 Cascade Ridge					555 Long Wharf Drive 12th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Southington					New Haven		CT	06511

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Barbara	S.	Bayless		Retired		
<b>Street Address</b>					<b>Street Address</b>		
175 Cape May Dr, Ste 203					175 Cape May Dr, Ste 203		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wilmington			OH	45177	Wilmington	OH	45177

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Helen	M.	Beall		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1255 Mount Ida Rd					1255 Mount Ida Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Oroville			CA	95966	Oroville	CA	95966

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		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		
	Julianne		Beall		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
9506 Saint Andrews Way					9506 Saint Andrews Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Silver Spring			MD	20901	Silver Spring	MD	20901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Kathleen		Beardon		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
12780 SW Percheron Ln					12780 SW Percheron Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Beaverton			OR	97008	Beaverton	OR	97008

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		
	Andrew		Beck		Retired		
<b>Street Address</b>					<b>Street Address</b>		
169 Hudson St, #7N					169 Hudson St, #7N		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10013	New York	NY	10013

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/21/2017		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			
	Daniel		Becker		Retired			
Street Address					Street Address			
290 Rumstick Road					290 Rumstick Road			
City			State	Zip	City		State	Zip
Barrington			RI	02806	Barrington		RI	02806

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		7.50

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Zoe		Becker		Dr. Zoe Becker, Marriage & Family Therapist			
Street Address					Street Address			
131 Brompton Ave					131 Brompton Ave			
City			State	Zip	City		State	Zip
San Francisco			CA	94131	San Francisco		CA	94131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Melvin	L.	Bedrick		Retired			
Street Address					Street Address			
1100 Park Ave					1100 Park Ave			
City			State	Zip	City		State	Zip
New York			NY	10128-1202	New York		NY	10128-1202

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		Belkus		Reebok			
Street Address					Street Address			
562 Main St					1895 J W Foster Blvd			
City			State	Zip	City		State	Zip
Hampstead			NH	03841	Canton		MA	02021

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Britt		Bell		Retired			
Street Address					Street Address			
249 Woodruff Ave					249 Woodruff Ave			
City			State	Zip	City		State	Zip
Wakefield			RI	02879	Wakefield		RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Arlene		Bender		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7919 Via Ensenada					7919 Via Ensenada		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Carlsbad			CA	92009	Carlsbad	CA	92009

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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		Bender		Brown University		
<b>Street Address</b>					<b>Street Address</b>		
108 Ocean Avenue					Office of the Vice President & General Counsel		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02905	Providence	RI	02912

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/30/2017		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		
	Kathryn		Bendheim		Impact for Education		
<b>Street Address</b>					<b>Street Address</b>		
10 Woodhaven Road					10 Woodhaven Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Barrington	RI	02806

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/03/2017		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		
	William	J	Benell		Federal Sign		
<b>Street Address</b>					<b>Street Address</b>		
33 West River Parkway					135 Dean Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Providence			RI	02904	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Elizabeth		Bennett		Africa Direct		
<b>Street Address</b>					<b>Street Address</b>		
2300 Krameria St					2300 Krameria St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Denver			CO	80207	Denver	CO	80207

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Normand	G	Benoit		Partridge Snow & Hahn		
<b>Street Address</b>					<b>Street Address</b>		
108 Pratt St.					180 South Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	John	B	Bentz		Property Advisory Group		
<b>Street Address</b>					<b>Street Address</b>		
1 Fair Oaks Court South					4 Cathedral Sq, Apt G01		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	John	B	Bentz		Property Advisory Group		
<b>Street Address</b>					<b>Street Address</b>		
1 Fair Oaks Court South					4 Cathedral Sq, Apt G01		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Linda		Bentz		Property Advisory Group		
<b>Street Address</b>					<b>Street Address</b>		
1 Fair Oaks Ct S.					4 Cathedral Square		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Margaret		Benz		Platform to Employment		
<b>Street Address</b>					<b>Street Address</b>		
28 Elizabeth Road					2350 Post Rd, Ste 101		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	R	Beretta		Robinson Green Beretta Corp		
<b>Street Address</b>					<b>Street Address</b>		
50 Grandview Ave					50 Holden Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Doris	B.	Bergen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
642 Schultz Drive					642 Schultz Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hamilton			OH	45013	Hamilton	OH	45013

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/25/2017		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		
	Louis	D.	Bernstein		Bernstein Law Firm		
<b>Street Address</b>					<b>Street Address</b>		
1241 W. Lill Ave					350 N. Clark St, Ste 400		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60614	Chicago	IL	60654-4980

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Tom		Bernstein		Chelsea Piers Management		
<b>Street Address</b>					<b>Street Address</b>		
1133 Fifth Avenue					62 Chelsea Piers, Suite 300		
<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	10011

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Courtney		Bianchi		St. Mary Academy - Bay View		
<b>Street Address</b>					<b>Street Address</b>		
215 Rollingwood Dr					3070 Pawtucket Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	Riverside	RI	02915

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Gil	A.	Bianchi	Jr.	Bianchi & Brouillard			
<b>Street Address</b>					<b>Street Address</b>			
215 Rollingwood Dr.					56 Pine St. #250			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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			
	Edna		Bick		Genesys Integrated Group Practice			
<b>Street Address</b>					<b>Street Address</b>			
9468 Beecher Rd					8483 Holly Rd. #201			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Flushing					Grand Blanc		MI	48439

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia	M.	Bidwill		One Third LLC			
<b>Street Address</b>					<b>Street Address</b>			
730 Glenview Road					730 Glenview Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Glenview					Glenview		IL	60025

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		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			
	Linda		Birdy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
8922 Stone Harbour Loop					8922 Stone Harbour Loop			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bradenton					Bradenton		FL	34212

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Bisberg		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1506 Courtland Avenue					1506 Courtland Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Park Ridge					Park Ridge		IL	60068

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Earl		Biven		Retired			
<b>Street Address</b>					<b>Street Address</b>			
6352 Sierra Elena Rd					6352 Sierra Elena Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Irvine			CA	92603	Irvine	CA	92603	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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			
	Katherine		Blacklock		RISD			
<b>Street Address</b>					<b>Street Address</b>			
46 Montague Street					2 College St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Providence			RI	02906	Providence	RI	02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Elizabeth		Blanchard		Southcoast Health			
<b>Street Address</b>					<b>Street Address</b>			
9 Anthony St					101 Page St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
New Bedford			MA	02740-3402	New Bedford	MA	02740-3464	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Cathy		Bledsoe		Brown University			
<b>Street Address</b>					<b>Street Address</b>			
50 Lincoln Ave					One Prospeck St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Barrington			RI	02806-2135	Providence	RI	02912	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Wendy		Bloom		Kirkland & Ellis			
<b>Street Address</b>					<b>Street Address</b>			
2714 Sheridan Rd					300 North LaSalle			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Highland Park			IL	60035-1441	Chicago	IL	60654	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Linda	A.	Bodenmann		Southcoast Hospitals Group			
<b>Street Address</b>					<b>Street Address</b>			
16 Prince Snow Circle					101 Page Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mattapoisett					New Bedford		MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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			
	Susan		Bodington		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1 Town Way					1 Town Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Little Compton					Little Compton		RI	02837

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/16/2017		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			
	Amy	S.	Boger		Dirt and Light Arts, LLC			
<b>Street Address</b>					<b>Street Address</b>			
22 Liberty Dr					243 Old Pickard Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Concord		MA	01742

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Leon		Boghossian		Hinckley Allen & Snyder, LLP			
<b>Street Address</b>					<b>Street Address</b>			
903 Providence Place, Apt 373					100 Westminster St, Ste 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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			
Capt.	Sean	P	Bogus		Northeast Marine Pilots			
<b>Street Address</b>					<b>Street Address</b>			
12 Bay Street					243 Spring Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jamestown					Newport		RI	02840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Mary		Boies		Boies Schiller Flexner			
<b>Street Address</b>					<b>Street Address</b>			
2 Middle Patent Rd					333 Main Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Armonk					Armonk		NY	10504

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Yvette	M.	Boisclair		Mandell Schwartz and Boisclair			
<b>Street Address</b>					<b>Street Address</b>			
414 Love Lane					One Park Row			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/01/2017		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			
	Bruce		Bookbinder		Delta Mechanical Contractors LLC			
<b>Street Address</b>					<b>Street Address</b>			
44 Wilclar St					44 Wilclar St			
<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
	Credit/Debit Card	Individual	05/17/2017		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			
	Rodger		Booth		King-Fisher Company, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
25 Bates Trail					81 Old Ferry Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					Lowell		MA	01854

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Rodger		Booth		King-Fisher Company, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
25 Bates Trail					81 Old Ferry Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					Lowell		MA	01854

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Rodger		Booth		King-Fisher Company, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
25 Bates Trail					81 Old Ferry Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					Lowell		MA	01854

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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		Bottaro		The Bottaro Law Firm LLC			
<b>Street Address</b>					<b>Street Address</b>			
30 Ann Drive					100 Midway Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Randy	J	Bottella		Reliable Collision			
<b>Street Address</b>					<b>Street Address</b>			
31 Hoover Street					31 Hoover St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick					West Warwick		RI	02893

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Raymond		Bourque		Retired			
<b>Street Address</b>					<b>Street Address</b>			
10 Sunset Rd					10 Sunset Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Attleboro					Attleboro		MA	02703-3342

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Krysta		Bouzek		AOL			
<b>Street Address</b>					<b>Street Address</b>			
1942 Westlake Ave					770 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seattle					New York		NY	10003

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Jane		Bowers		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2516 E. Stratford Ct					2516 E. Stratford Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Milwaukee			WI	53211	Milwaukee	WI	53211

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Camilla		Bowman		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1010 S State Rd 39					1010 S State Rd 39		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lebanon			IN	46052	Lebanon	IN	46052

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Peter	T	Bowman		Verizon		
<b>Street Address</b>					<b>Street Address</b>		
24 Arlington Rd					185 Franklin St.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Melrose			MA	02176	Boston	MA	02110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		
	Samuel	J	Bradner		Peregrine Group		
<b>Street Address</b>					<b>Street Address</b>		
38 Hart Street					20 Newman Avenue, Suite 1005		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Rumford	RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Sharon		Brandt		Retired		
<b>Street Address</b>					<b>Street Address</b>		
206 Dodge St					206 Dodge St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Delta			CO	81416	Delta	CO	81416

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Ruth		Brandwein		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1503 Clower Creek Dr					1503 Clower Creek Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sarasota			FL	34231	Sarasota	FL	34231

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/22/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas		Breen		South County Hospital		
<b>Street Address</b>					<b>Street Address</b>		
75 Spartina Cove Way					100 Kenyon Avenue		
<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	06/20/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Stephen		Breggia		Law Offices of Stephen E. Breggia		
<b>Street Address</b>					<b>Street Address</b>		
9 Alern Way					395 Smith St, Ste 2		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Laurel		Breitkopf		Retired		
<b>Street Address</b>					<b>Street Address</b>		
450 Greenbriar Ln					450 Greenbriar Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverwood			IL	60015	Riverwood	IL	60015

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Karey		Bresenhan		Quilts, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
4115 Windy Hill					7660 Woodway, Suite 550		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
La Grange			TX	78945	Houston	TX	77063

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/18/2017		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		
	Devra		Breslow		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10926 Verano Rd					10926 Verano Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Los Angeles			CA	90077	Los Angeles	CA	90077

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		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		
	Dawn		Brewer		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1046 Princeton Dr					1046 Princeton Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Marina del Rey			CA	90292	Marina del Rey	CA	90292

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Samuel		Brickle		Hyman Brickle & Son, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
8 Strawberry Dr					235 Singleton Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Elaine		Bridges		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 3605					PO Box 3605		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Angelo			TX	76902	San Angelo	TX	76902

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/16/2017		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	G.	Briody	Esq.	Briody Law		
<b>Street Address</b>					<b>Street Address</b>		
93 Crest Field Lane					91 Friendship St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	Providence	RI	02903-3837

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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			
	Edward	T.	Broderick		Gilbane Development Co			
<b>Street Address</b>					<b>Street Address</b>			
360 Wickford Point Rd					7 Jackson Walkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Providence		RI	02903-3638

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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			
	Gila		Bronner		Bronner Group, LLC			
<b>Street Address</b>					<b>Street Address</b>			
120 N. LaSalle St					120 N. LaSalle St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60602-3488

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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			
	Barbara		Brooks		Retired			
<b>Street Address</b>					<b>Street Address</b>			
22880 N. Cranes Mill Rd					22880 N. Cranes Mill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Canyon Lake					Canyon Lake		TX	78133

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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	J	Brough	Jr	DiSanto Priest & Co			
<b>Street Address</b>					<b>Street Address</b>			
2 Mast Ct					117 Metro Center Blvd, Suite 3000			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wakefield					Warwick		RI	02886-1777

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		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			
	Leo	F.	Brousseau		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4 Cynthia Rd					4 Cynthia Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865-4302

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Lawrence	E.	Brown		Omni Development Corporation			
<b>Street Address</b>					<b>Street Address</b>			
36 Whitmarsh St.					810 Eddy Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Sylvia	E.	Brown		Retired			
<b>Street Address</b>					<b>Street Address</b>			
50 Park Row West, Apt 908					50 Park Row West, Apt 908			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-1151

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Kristine		Brunt		MSI Building Supplies			
<b>Street Address</b>					<b>Street Address</b>			
3814 Crown Bay #8					3814 Crown Bay #8			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
St. Thomas					St. Thomas		VI	00802

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Thomas		MichaeBruzzeze	Esq.	Bruzzeze Law Group			
<b>Street Address</b>					<b>Street Address</b>			
120 Falcon Circle					300 Centerville Rd, #300			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Dana	O.	Bryan		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
341 W. Horseshoe Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tallahassee							FL	32317-8681



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	John	E.	Bulman		Pierce Atwood LLP			
<b>Street Address</b>					<b>Street Address</b>			
23 Palmer River Rd					72 Pine St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Swansea					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	William		Buonanno		Self-Employed Physician			
<b>Street Address</b>					<b>Street Address</b>			
3 Dean Ridge Drive					35 Sockanossett Crossroads			
<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	05/17/2017		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			
	Melissa		Burch		Lendlease Development			
<b>Street Address</b>					<b>Street Address</b>			
210 E. 68th St					200 Park Ave, 9th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10166

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Tonio		Burgos		Tonio Burgos & Associates			
<b>Street Address</b>					<b>Street Address</b>			
206 W. Shearwater Court					115 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jersey City					New York		NY	10006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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	S.	Burk		State of RI, DCYF			
<b>Street Address</b>					<b>Street Address</b>			
67 Durfee Rd					82 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tiverton					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Candice		Burns		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
10550 Mountainview Dr					10550 Mountainview Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Dexter			MI	48130	Dexter	MI	48130

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	William	A.	Burns		Southcoast Health System		
<b>Street Address</b>					<b>Street Address</b>		
9 Grove St					101 Page Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New Bedford			MA	02740	New Bedford	MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Barbara		Burrows		Retired		
<b>Street Address</b>					<b>Street Address</b>		
552 S. Cove Dr					552 S. Cove Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cedar City			UT	84720	Cedar City	UT	84720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Rupert		Burtan		Aramark		
<b>Street Address</b>					<b>Street Address</b>		
78 County St					167 Valley St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rehoboth			MA	02769-2312	Providence	RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Busharis		Public Defender's Office		
<b>Street Address</b>					<b>Street Address</b>		
2033 Atascadero Ct					Leon County Courthouse		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tallahassee			FL	32317	Tallahassee	FL	32301

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	David		Butenhof		Hewlett Packard Enterprise		
<b>Street Address</b>					<b>Street Address</b>		
3 Evergreen Ln					165 Dascomb Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Amherst			NH	03031	Andover	MA	01810

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		
	Maryellen		Butke		Namaste Consulting		
<b>Street Address</b>					<b>Street Address</b>		
24 Firglade Avenue					24 Firglade Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		
	Bette		Byers		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
4686 Blackstone Ct					4686 Blackstone Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Santa Maria			CA	93455	Santa Maria	CA	93455

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		3.75

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Claire		Bynum		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1332 Fuller Rd					1332 Fuller Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tallahassee			FL	32303	Tallahassee	FL	32303

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Barbara		Byron		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
3684A Simmons Mill St SW					3684A Simmons Mill St SW		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Olympia			WA	98512	Olympia	WA	98512

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Louis	A	Cabral		Conroy Development Corp.		
<b>Street Address</b>					<b>Street Address</b>		
304 Church Pond Drive					800 Technology Center Dr. #1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878	Stoughton	MA	02072

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Steven	M.	Cabral		Crossman Engineering		
<b>Street Address</b>					<b>Street Address</b>		
44 Wagon Wheel Rd					141 Centerville Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Attleboro			MA	02760-3576	Warwick	RI	02886-4335

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Helen	N.	Cahn		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
730 Camino Mirada					730 Camino Mirada		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Santa Fe			NM	87505	Santa Fe	NM	87505

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		Cain		Retired		
<b>Street Address</b>					<b>Street Address</b>		
66 Atherton Rd, Unit 1					66 Atherton Rd, Unit 1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brookline			MA	02446	Brookline	MA	02446

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	A.	Caldwell	Jr.	Caldwell & Johnson, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
6500 Post Road					6500 Post Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
No. Kingstown			RI	02852-1840	No. Kingstown	RI	02852-1840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Martha		Callaghan Chaffee		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
6912 E. Mighty Saguaro Way								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Scottsdale			AZ	85266-7318				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Olga		Callender		Retired			
<b>Street Address</b>					<b>Street Address</b>			
108 Georgetown Rd					108 Georgetown Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Bristol			CT	06010	Bristol		CT	06010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	N.	Calvino		Calvino Law Associates			
<b>Street Address</b>					<b>Street Address</b>			
206 Sweetbriar Dr					373 Elmwood Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston			RI	02920	Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Judith		Campbell		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1109 Washingtonville Dr					1109 Washingtonville Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Baltimore			MD	21210	Baltimore		MD	21210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Pat		Campellone		Crossroads RI			
<b>Street Address</b>					<b>Street Address</b>			
160 Broad St					160 Broad St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Providence			RI	02903-4028	Providence		RI	02903-4028

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Kristen	J.	Canessa		New Bedford Public Schools			
<b>Street Address</b>					<b>Street Address</b>			
19 Baker Lane					455 County St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lakeville					New Bedford		MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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	J	Caniglia		Stand Corporation			
<b>Street Address</b>					<b>Street Address</b>			
121 Namquid Dr					105 Pennsylvania Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02888-3017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Chris		Cannon		Retired			
<b>Street Address</b>					<b>Street Address</b>			
845 E. Shore Rd					845 E. Shore Rd			
<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
	Check	Individual	06/01/2017		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			
	Ann Marie	P	Carbone		Fleet Plumbing & Heating, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
43 Armand Way					42 Armond Way			
<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	06/07/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	R.	Carchedi		GZA GeoEnvironmental, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
106 Arbutus Trl					530 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		Carey		Platinum South, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
116 Martin St					2355 NE 163rd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Indian Harbour Beach					North Miami Beach		FL	33160-3902

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		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			
	Joanne		Carlino		Douglas Lumber Corp			
<b>Street Address</b>					<b>Street Address</b>			
326 Angell Rd					125 Douglas Pike			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Smithfield		RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Maria	A.	Carlino		Citizens Bank			
<b>Street Address</b>					<b>Street Address</b>			
14 Riata Drive					One Citizens Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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			
	James	R.	Caroselli		CDR Maguire			
<b>Street Address</b>					<b>Street Address</b>			
17 Shattock Ave					225 Chapman St, 4th Fl			
<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	04/03/2017		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			
	Sandra		Carr		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 223					PO Box 223			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Silver Lake					Silver Lake		NH	03875

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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			
	William		Carr		Retired			
<b>Street Address</b>					<b>Street Address</b>			
93 Nayatt Rd					93 Nayatt Rd			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Barrington					Barrington		RI 02806-3310	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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	L	Carr	Jr	H. Carr & Sons			
<b>Street Address</b>					<b>Street Address</b>			
P.O Box 9088					160 Royal Little Dr			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Providence					Providence		RI 02904	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	JoAnn		Carrigan		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1633 Country Club Ave					1633 Country Club Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Omaha					Omaha		NE 68104	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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			
	John	T	Carroll		Law Offices of John T. Carroll			
<b>Street Address</b>					<b>Street Address</b>			
21 Davis Circle					627 Warwick Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Warwick					Warwick		RI 02888	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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	T	Carroll		Law Offices of John T. Carroll			
<b>Street Address</b>					<b>Street Address</b>			
21 Davis Circle					627 Warwick Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Warwick					Warwick		RI 02888	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Eben		Carsey		Dr. Eben Carsey, Pediatrics			
<b>Street Address</b>					<b>Street Address</b>			
2144 17th St					4745 Arapahoe Ave, #310			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Boulder			CO	80302	Boulder		CO	80301

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Davida	R.	Carvin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
63 Atlantic Avenue, Apt 10A					63 Atlantic Avenue, Apt 10A			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Boston			MA	02110	Boston		MA	02110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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			
	Gino		Casagrande		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
1037 E. 19th Ave								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Eugene			OR	97403				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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			
	Thomas	G.	Casale		Casale Auto Body			
<b>Street Address</b>					<b>Street Address</b>			
330 Seven Mile Road					2741 Hartford Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Hope			RI	02831	Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Lucia	Gill	Case		Unemployed			
<b>Street Address</b>					<b>Street Address</b>			
141 Morris Avenue					141 Morris Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Linda		Casey		Masachusetts Dept. of Public Health		
<b>Street Address</b>					<b>Street Address</b>		
6 Hillside Ave					250 Washington St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Grafton			MA	01519	Boston	MA	02108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		6.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Susan		Casey		Accent Homes, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 2674					13739 Lincoln St NE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
El Granada			CA	94018	Ham Lake	MN	55304

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Diane		Castro		Self-Employed Graphic Designer		
<b>Street Address</b>					<b>Street Address</b>		
809 Magnolia Ct					809 Magnolia Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Keller			TX	76248	Keller	TX	76248

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/28/2017		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		
	Karen		Catuogno		Abbott Properties, LLC		
<b>Street Address</b>					<b>Street Address</b>		
38 South Pier Rd					380 Jefferson Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889-6535	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Alfred	A	Cavallaro		Retired		
<b>Street Address</b>					<b>Street Address</b>		
172 Pine Glen Dr					172 Pine Glen Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818-1901	East Greenwich	RI	02818-1901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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			
	Barbara	M.	Cavalluzzi		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4148 Buckhorn Rd					4148 Buckhorn Rd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Sanford			NC	27330	Sanford		NC	27330

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Matthew		Cedor		GTECH			
<b>Street Address</b>					<b>Street Address</b>			
88 Countryside Drive					10 Memorial Blvd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland			RI	02864	Providence		RI	02903-1160

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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			
	John		Chamberlin		RISD			
<b>Street Address</b>					<b>Street Address</b>			
10 Railroad St					2 College St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Slatersville			RI	02876-8066	Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	R.	Chambrello		IGT			
<b>Street Address</b>					<b>Street Address</b>			
504 Mt. Vernon Rd					10 Memorial Blvd.			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Plantsville			CT	06479	Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Christopher		Chantre		Overhead Door Co. of Providence			
<b>Street Address</b>					<b>Street Address</b>			
155 Ashley Street					1 Overhead Way			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston			RI	02920	Warwick		RI	02888-1755

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Courtney	L	Chase		Chaseville Entreprises			
<b>Street Address</b>					<b>Street Address</b>			
215 Arlington Avenue					215 Arlington Avenue			
<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
	Credit/Debit Card	Individual	06/30/2017		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			
	Kevin		Chase		Triology Development LLC			
<b>Street Address</b>					<b>Street Address</b>			
215 Arlington Ave					215 Arlington Ave			
<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
	Credit/Debit Card	Individual	06/30/2017		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			
	Kevin		Chase		Triology Development LLC			
<b>Street Address</b>					<b>Street Address</b>			
215 Arlington Ave					215 Arlington Ave			
<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
	Credit/Debit Card	Individual	04/01/2017		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			
	Aimee		Cheek		Self-Employed Consultant			
<b>Street Address</b>					<b>Street Address</b>			
6209 Estelle St					6209 Estelle St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Diego					San Diego		CA	92115

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/09/2017		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			
	Gregory	S.	Chernack		Hollingsworth LLP			
<b>Street Address</b>					<b>Street Address</b>			
3616 Thornapple Street					1350 I Street NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chevy Chase					Washington		DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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			
	Gregory	S.	Chernack		Hollingsworth LLP			
<b>Street Address</b>					<b>Street Address</b>			
3616 Thornapple Street					1350 I Street NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chevy Chase					Washington		DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Gregory	S.	Chernack		Hollingsworth LLP			
<b>Street Address</b>					<b>Street Address</b>			
3616 Thornapple Street					1350 I Street NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chevy Chase					Washington		DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		60.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Holly	H.	Childs		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1126 Reed Valley Rd					1126 Reed Valley Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fayetteville					Fayetteville		AR	72704

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Alan		Chille		Providence Performing Arts Center			
<b>Street Address</b>					<b>Street Address</b>			
24 Rogler Farm Road					220 Weybosset Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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			
	Ramona		Chipman		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1341 Denlyn St					1341 Denlyn St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Novato					Novato		CA	94947

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/19/2017		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		
	Guy		Chipparoni		Res Publica Group		
<b>Street Address</b>					<b>Street Address</b>		
111 Sheridan Rd					444 N. Michigan Ave.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wilmette			IL	60091	Chicago	IL	60611

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/14/2017		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		
	Paul	J	Choquette	Jr.	Gilbane Building Co.		
<b>Street Address</b>					<b>Street Address</b>		
57 Old Forge Road					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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		
	Nicholas	M.	Christ		Baycoast Bank		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 3605					330 Swansea Mall Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fall River			MA	02722	Swansea	MA	02777

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Leslie	S.	Christensen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
9728 Swift Creek Ct					9728 Swift Creek Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fairfax Station			VA	22039	Fairfax Station	VA	22039

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/14/2017		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		
	Frank	A.	Ciccone		Retired		
<b>Street Address</b>					<b>Street Address</b>		
15 Mercy St					15 Mercy St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02909	Providence	RI	02909-5302

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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			
	Thomas	M	Cioci		Intown Parking Inc.			
<b>Street Address</b>					<b>Street Address</b>			
30 Camden Ct					1 Fulton St # 602			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Wakefield					Providence		RI 02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Ronald	D.	Ciotti		Hinckley Allen & Snyder			
<b>Street Address</b>					<b>Street Address</b>			
37 Hampshire Hills Dr					100 Westminster St, Suite 1500			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Bow					Providence		RI 02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Antonio		Cipolla		Duff Electric			
<b>Street Address</b>					<b>Street Address</b>			
2 Dario Dr					1525 Old Louisquisset Pike			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Lincoln					Lincoln		RI 02865	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Cecilia		Clark		Bureau of Indian Affairs			
<b>Street Address</b>					<b>Street Address</b>			
10119 Jiles, NE					1849 C Street NW			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Albuquerque					Washington		DC 20240	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia		Clark		Retired			
<b>Street Address</b>					<b>Street Address</b>			
13719 S. Lake Dr					13719 S. Lake Dr			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Plainfield					Plainfield		IL 60544	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Sheila		Clark		Retired		
<b>Street Address</b>					<b>Street Address</b>		
31815 Eagle River Rd					31815 Eagle River Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Eagle River			AK	99577	Eagle River	AK	99577

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Marilyn		Clements		The Silvermine Guild of Artists		
<b>Street Address</b>					<b>Street Address</b>		
104 Wallacks Drive					1037 Silvermine Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Stamford			CT	06902	New Canaan	CT	06840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Carrie		Clifford		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
17940 W. Hunt Club Dr					17940 W. Hunt Club Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mokena			IL	60448-8619	Mokena	IL	60448-8619

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Joan	E.	Clifford		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
840 N. Lake Shore Dr, #2501							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611-2489			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Robert	A.	Clifford		Clifford Law Offices		
<b>Street Address</b>					<b>Street Address</b>		
120 N. LaSalle St					120 N. LaSalle St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60602	Chicago	IL	60602



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/30/2017		350.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Darryl		Cobb		Charter School Growth Fund		
<b>Street Address</b>					<b>Street Address</b>		
5107 S. Kimbark Ave					10901 W. 120th Ave, Suite 450		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60615-3909	Broomfield	CO	80021

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Monica		Cody		Monica Cody, Independent Real Estate Agent		
<b>Street Address</b>					<b>Street Address</b>		
1655 Cedar Hollow Way					1655 Cedar Hollow Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Reston			VA	20194	Reston	VA	20194

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Bruce		Cohen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7 Ware St					7 Ware St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Worcester			MA	01602	Worcester	MA	01602

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Cara	J.	Cohen		Parent Advocacy and Educational Consulting		
<b>Street Address</b>					<b>Street Address</b>		
14 Babe Ruth Dr					115 Greenough St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sudbury			MA	01776-1942	Brookline	MA	02445

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Emilie		Cohen		Nightingale Bamford School		
<b>Street Address</b>					<b>Street Address</b>		
35 E. 84th St					20 East 92nd St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10028-0871	New York	NY	10128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/02/2017		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			
	Barbara	B.	Cohn		BLC Strategic Advisors, LLC			
<b>Street Address</b>					<b>Street Address</b>			
33 E. 70th St, Apt 10C					14 Wicklow Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					Delmar		NY	12054

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Arthur		Coia		Blackstone River Group LLC			
<b>Street Address</b>					<b>Street Address</b>			
360 Olney St					360 Olney 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
	Credit/Debit Card	Individual	04/13/2017		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			
	Melinda		Coker		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
4411 Cascades Shorline Dr					4411 Cascades Shorline Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tyler					Tyler		TX	75709

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Donna	L.	Colapietro-Corsetti		Permier Land Development, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
9 Grandstand Dr					100 Dorrance St, Unit 20			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Providence		RI	02903-2877

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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			
	Colin	A.	Coleman		Partridge, Snow & Hahn			
<b>Street Address</b>					<b>Street Address</b>			
141 Edgewater Dr					40 Westminster St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Needham					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Joyce		Coleman		University of Oklahoma		
<b>Street Address</b>					<b>Street Address</b>		
313 Cate Center Dr					660 Parrington Oval		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Norman			OK	73019	Norman	OK	73019

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patrick	G.	Collins		H. V. Collins Company		
<b>Street Address</b>					<b>Street Address</b>		
9 Governor Bradford Drive					99 Gano St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		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		
	Webster		Collins		CB Richard Ellis		
<b>Street Address</b>					<b>Street Address</b>		
533 Harland Street					33 Arch Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Milton			MA	02186	Boston	MA	02110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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		
	Elizabeth		Colton		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1848 Pine Street					1848 Pine Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94109	San Francisco	CA	94109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John		Comella		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1900 JF Kennedy Blvd					1900 JF Kennedy Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Philadelphia			PA	19103	Philadelphia	PA	19103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Thomas	B.	Conley		Victor Realty			
<b>Street Address</b>					<b>Street Address</b>			
11 Trinity Pkwy					11 Trinity Pkwy			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	John	P.	Connelly		Hinckley, Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
67 May sT					50 Kennedy Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Needham					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Laurie		Conner Jarrett		Tax Office of Laurie B. Connor, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
142 Dogwood Ct, #1442					142 Dogwood Ct, #1442			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Waleska					Waleska		GA	30183

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Janet	M.	Connor		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
663 W. Boot Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Chester							PA	19380-1056

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Daniel	P	Connors		Advocacy Solutions			
<b>Street Address</b>					<b>Street Address</b>			
25 Horizon Dr					4 Richmond Square			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Alice		Considine		Diocesan Health		
<b>Street Address</b>					<b>Street Address</b>		
26 Star of the Sea Drive					368 N Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Dartmouth			MA	02748	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Kevin	M.	Considine	Esq.	Law Office of Kevin M. Considine		
<b>Street Address</b>					<b>Street Address</b>		
One Beacon St					One Beacon St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boston			MA	02108	Boston	MA	02108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Alice	P.	Cooper		Retired		
<b>Street Address</b>					<b>Street Address</b>		
295 Saint Johns Pl, Apt 6E					295 Saint Johns Pl, Apt 6E		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brooklyn			NY	11238	Brooklyn	NY	11238

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		60.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Cynthia		Cooper		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
9 Marigold Pl					9 Marigold Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Durham			NC	27705	Durham	NC	27705

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		600.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John	K.	Cooper		Ferland Corp.		
<b>Street Address</b>					<b>Street Address</b>		
27 Huron Ave					558 Smithfield Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mashpee			MA	02749-4969	Pawtucket	RI	02680

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Scott	E.	Cooper		Hinckley Allen		
<b>Street Address</b>					<b>Street Address</b>		
2184 Massachusetts Avenue					100 Westminster St, Suite 1500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lexington			MA	02421	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Katie		Corey		Brighton Central School District		
<b>Street Address</b>					<b>Street Address</b>		
25 York St					2035 Monroe Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Honeoye Falls			NY	14472	Rochester	NY	14618

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		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		
	Christine	A	Corrente		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
140 Slater Ave					150 Slater Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/03/2017		5,400.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Judith-Ann		Corrente		Retired		
<b>Street Address</b>					<b>Street Address</b>		
112 East 78th Street					112 East 78th Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10075	New York	NY	10075

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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	A.	Corsetti		Premier Development Co.		
<b>Street Address</b>					<b>Street Address</b>		
9 Grandstand Drive					466 Mattity Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	North Smithfield	RI	02896-9550

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		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			
	Stephanie		Corsetti		Alliance Real Estate Group LLC			
<b>Street Address</b>					<b>Street Address</b>			
466 Mattity Rd					70 Jefferson Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield					Warwick		RI	02888

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/18/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Barbara		Corwin		Sun Microsystems Inc.			
<b>Street Address</b>					<b>Street Address</b>			
1230 Winding Ridge Terrace					4200 Network Circle			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Colorado Springs					Santa Clara		CA	95054

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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			
	Bradley		Cosgrove		Clifford Law Office			
<b>Street Address</b>					<b>Street Address</b>			
8571 Farmview Dr					120 North LaSalle St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Frankfort					Chicago		IL	60602

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	O	Costantino		Cosco Incorporated			
<b>Street Address</b>					<b>Street Address</b>			
75 Hazard Ave					707 Park East Drive			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Woonsocket		RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Cash	Individual	06/06/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Diane		Cote-Travisano		Parent Support Network			
<b>Street Address</b>					<b>Street Address</b>			
18 Comfort Lane					535 Centerville Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Kingstown					Warwick		RI	02886-4486

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Chris		Cotham		Parent Support Network of RI		
<b>Street Address</b>					<b>Street Address</b>		
535 Centerville Rd, #202					535 Centerville Rd, #202		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Rita		Cotterly		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
6632 Normandy Rd					6632 Normandy Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fort Worth			TX	76112	Fort Worth	TX	76112

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Caroline		Couig		San Jose Mercury News		
<b>Street Address</b>					<b>Street Address</b>		
118 Sharon Ln							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wethersfield			CT	06109			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/21/2017		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		
	Cameron	L.	Cowan		Orrick		
<b>Street Address</b>					<b>Street Address</b>		
9722 the Corral Drive					1152 15th Street MW		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Potomac			DC	20845	Washington	DC	20225

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patricia		Cox		Patricia Cox, Philanthropist		
<b>Street Address</b>					<b>Street Address</b>		
1420 N. Lake Shore Dr					1420 N. Lake Shore Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610-6657	Chicago	IL	60610-6657



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patricia		Crigler		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
4665 Lucille Dr					4665 Lucille Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Diego			CA	92115	San Diego	CA	92115

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Donald		Crippen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
844 W. Cliff Dr, Apt 305					844 W. Cliff Dr, Apt 305		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Spokane			WA	99204	Spokane	WA	99204

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Melissa	E.	Crisafulli		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
396 Chestnut St					396 Chestnut St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newton			MA	02465-2952	Newton	MA	02465-2952

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/29/2017		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		
	Peter	D.	Crist		Crist Holder Associates		
<b>Street Address</b>					<b>Street Address</b>		
306 N. Grant					3250 Lacey Rd, Suite 450		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hinsdale			IL	60521	Downers Grove	IL	60515

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Richard		Crouthamel		IEDRO		
<b>Street Address</b>					<b>Street Address</b>		
901 Main St					901 Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Deale			MD	20751	Deale	MD	20751

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/02/2017		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		
	Nancy		Crow		Hutchins & Associates LLC		
<b>Street Address</b>					<b>Street Address</b>		
1031 N. Marion St					1999 Broadway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Denver			CO	80218	Denver	CO	80202

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Andrew		Crowe		GTech		
<b>Street Address</b>					<b>Street Address</b>		
11 Roberta Drive					10 Memorial Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		
	Susan		Crowe		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2179 Cambridge Ave					2179 Cambridge Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cardiff			CA	92007	Cardiff	CA	92007

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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		
	James		Crowley		Brown University		
<b>Street Address</b>					<b>Street Address</b>		
93 Bluff Street					91 Waterman Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverside			RI		Providence	RI	02912

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/16/2017		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		
	Lauren		Crowley Corrinet		CBRE, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
98 North St					200 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwich			CT	06830	New York	NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/26/2017		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		Crown		Henry Crown & Co.		
<b>Street Address</b>					<b>Street Address</b>		
65 E Goethe St					222 North LaSalle Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610	Chicago	IL	60601

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/26/2017		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		
	Paula	H.	Crown		Self-Employed Artist		
<b>Street Address</b>					<b>Street Address</b>		
65 E. Goethe St					65 E. Goethe St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610-2628	Chicago	IL	60610-2628

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Ann		Crowther		Retired		
<b>Street Address</b>					<b>Street Address</b>		
302 Brailsford Place					302 Brailsford Place		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saint Simons Island			GA	31522	Saint Simons Island	GA	31522

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Mark	A.	Cullion		Cullion Excavating Corp.		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 5560					906 Pontiac Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879	Cranston	RI	02910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Lessie		Culmer-Nier		Retired		
<b>Street Address</b>					<b>Street Address</b>		
167 Green Village Rd					167 Green Village Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Madison			NJ	07940	Madison	NJ	07940

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Catherine		Culver		Pepsico, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
1 Waverly Pl					100 E. Stevens Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Valhalla			NY	10595	Valhalla	NY	10595

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/11/2017		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		
	Cheryl		Cummer		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
12408 Mandarin Rd					12408 Mandarin Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Jacksonville			FL	32223	Jacksonville	FL	32223

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Octavio	K.	Cunha		Cumberland Farms		
<b>Street Address</b>					<b>Street Address</b>		
154 Walnut St					744 Branch Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Providence			RI	02914	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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		
	Edith		Cunningham		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1319 SW 28th Ter					1319 SW 28th Ter		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cape Coral			FL	33914	Cape Coral	FL	33914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	George		Cunningham		Dr. George Cunningham, MD		
<b>Street Address</b>					<b>Street Address</b>		
15515 Sunset Blvd.					15515 Sunset Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pacific Palisades			CA	90272	Pacific Palisades	CA	90272

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Donna		Cupelo		Verizon		
<b>Street Address</b>					<b>Street Address</b>		
4 Newell Dr					234 Washington Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Franklin			MA	02038-1599	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Donovan		Currier		North Star Realty		
<b>Street Address</b>					<b>Street Address</b>		
27 Brighton St, Fl 3					3890 Post. Rd., Suite 11		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02909	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Diane		Cushman Neal		Diane Cushman Neal, Self Employed		
<b>Street Address</b>					<b>Street Address</b>		
5994 S. Holly St					5994 S. Holly St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwood Village			CO	80111-4221	Greenwood Village	CO	80111-4221

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	J.	D'Alesio		BETA Group, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
4 Village Way, Apt A					6 Blackstone Valley Pl, #101		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Norton			MA	02766-2057	Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Linda		D'Amario Rossi		Advocacy Solutions		
<b>Street Address</b>					<b>Street Address</b>		
306 Dean Ridge Ct					148 State St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02920-3631	Boston	RI	02109-2510

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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		
	Linda		D'Amario Rossi		Advocacy Solutions		
<b>Street Address</b>					<b>Street Address</b>		
306 Dean Ridge Ct					148 State St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02920-3631	Boston	RI	02109-2510

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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		
	Alfonse	M.	D'Amato		Park Strategies		
<b>Street Address</b>					<b>Street Address</b>		
101 Park Ave, Suite 2506					101 Park Ave, Suite 2506		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10178-2599	New York	NY	10178-2599

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/16/2017		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		
	Cosimo		D'Elia		Pella Windows & Doors		
<b>Street Address</b>					<b>Street Address</b>		
24 Hawkins St					1325 Airport Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenville			RI	02828-3130	Fall River	MA	02720-4725

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Bonnie		Daanish		Walter & Haverfield, LLP		
<b>Street Address</b>					<b>Street Address</b>		
1300 West 103 St					1301 E. 9th St, #3500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cleveland			OH	44102	Cleveland	OH	44114

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Raymond	P.	Daddazio		Thornton Tomasetti, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
771 W. End Ave, Apt 11C					51 Madison Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10025-5539	New York	NY	10010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Andrew		Dady		Gibson Dunn			
<b>Street Address</b>					<b>Street Address</b>			
201 East 77th Street					200 Park Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10075

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/07/2017		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			
	Rebecca		Dahlstrom		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1117 Erie St					1117 Erie St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Oak Park					Oak Park		IL	60302-1904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		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			
	Jane		Dailey		University of Chicago			
<b>Street Address</b>					<b>Street Address</b>			
600 N. Fairbanks Ct					5801 S. Ellis Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60637

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Kevin	M.	Daley		Daley & Orton			
<b>Street Address</b>					<b>Street Address</b>			
34 Red Oak Rd					1383 Warwick Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Warwick		RI	02888-5066

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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	K.	Daley		IBEW Local 99			
<b>Street Address</b>					<b>Street Address</b>			
30 Howland Street					22 Amflex Drive			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		100.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	J.	Daly		Pierce Atwood LLP			
<b>Street Address</b>					<b>Street Address</b>			
87 Dianne Avenue					72 Pine St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portsmouth					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul	J.	Damiano		Damiano Agency			
<b>Street Address</b>					<b>Street Address</b>			
P.O Box 20630					121 Phenix Ave			
<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
	Check	Individual	05/09/2017		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			
	Melissa	E	Darigan		Patridge, Snow and Hahn			
<b>Street Address</b>					<b>Street Address</b>			
23 Spartina Cove Way					180 South Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Kingstown					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		45.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Marguerite	J.	Dastoor		Retired			
<b>Street Address</b>					<b>Street Address</b>			
725 W. Grandview Ave					725 W. Grandview Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sierra Madre					Sierra Madre		CA	91024

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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	C.	Davis		Law Office of Robert Davis			
<b>Street Address</b>					<b>Street Address</b>			
591 Camp Fuller Rd					15 Foster St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wakefield					Quincy		MA	02169-5307



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Shirley	Ross	Davis		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2550 Filbert St					2550 Filbert St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94123

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/12/2017		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			
	Cecile		Davis Anderson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1320 Lomay Place					1320 Lomay Place			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pasadena					Pasadena		CA	91103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Otha		Day		Drum to the Beat			
<b>Street Address</b>					<b>Street Address</b>			
1560 Massachusetts Ave					1560 Massachusetts Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Adams					North Adams		MA	01247

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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			
	Marjorie		Dearmont		Retired			
<b>Street Address</b>					<b>Street Address</b>			
101 Oak Crest Dr					101 Oak Crest Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bertram					Bertram		TX	78605

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		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			
	Margaret		Debell		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1702 19th St NW					1702 19th St NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20009

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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	E.	DeBlois	Jr.	Retired		
<b>Street Address</b>					<b>Street Address</b>		
109 Airport Rd, #8					109 Airport Rd, #8		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889	Warwick	RI	02889

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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		
	Roxanne	J.	Decyk		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
1540 N. Lake Shore Dr, Apt 16-S							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Anne		DeGroot		EpiVax, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
292 Morris Avenue					146 Clifford Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		DeJesus	Jr.	Southcoast Hospital Group		
<b>Street Address</b>					<b>Street Address</b>		
222 Edmond Drive					101 Pace Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	New Bedford	MA	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		DeLuca		Retired		
<b>Street Address</b>					<b>Street Address</b>		
35 Sunset Avenue					35 Sunset Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saunderstown			RI	02874-3238	Saunderstown	RI	02874-3238

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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		DeLuca		Retired			
<b>Street Address</b>					<b>Street Address</b>			
35 Sunset Avenue					35 Sunset Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saunderstown					Saunderstown		RI	02874-3238

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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	M.	Demarco		J. Demarco Landscaping, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
164 Rockwood Ave					164 Rockwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920-2309

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Nicholas		DeMartini		Fidelity National Title			
<b>Street Address</b>					<b>Street Address</b>			
30 Atkinson Rd					485 Lexington Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rockville Center					New York		NY	10017-2630

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Anthony	F	Dematteo		Dimeo Construction Co.			
<b>Street Address</b>					<b>Street Address</b>			
44 Bud Browning Cir					75 Chapman St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Kingstown					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Timothy		Dempsey		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
21 Heights Rd					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Plandome					New York		NY	10166

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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			
	Kimberly	J.	Denenberg		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
12224 Tillinghast Cir					12224 Tillinghast Cir			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Palm Beach Gardens					Palm Beach Gardens		FL	33418-1552

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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			
	Robert		Denenberg		Robert Denenberg, Investor			
<b>Street Address</b>					<b>Street Address</b>			
12224 Tillinghast Circle					12224 Tillinghast Circle			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Palm Beach Gardens					Palm Beach Gardens		FL	33418

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Steven	W.	DePasquale		Iron Construction Group LLC			
<b>Street Address</b>					<b>Street Address</b>			
266 Howard Ave					875 Centerville Rd, #11			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hope					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	L.	DeQuattro		RGB Architects			
<b>Street Address</b>					<b>Street Address</b>			
121 Briarcliff Ave					50 Holden St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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	V	Derentis		Residential Properties Ltd.			
<b>Street Address</b>					<b>Street Address</b>			
37 George St					140 Wickenden Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Guidou		Derisier		Providence Computer Resources			
<b>Street Address</b>					<b>Street Address</b>			
1800 Mineral Spring Ave, #165					1531 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					North Providence		RI	02911

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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			
	Bhogilal		Desai		Retired			
<b>Street Address</b>					<b>Street Address</b>			
514 Newport Ave					514 Newport Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861-3612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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			
	Bhogilal		Desai		Retired			
<b>Street Address</b>					<b>Street Address</b>			
514 Newport Ave					514 Newport Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861-3612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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			
	Bhogilal		Desai		Retired			
<b>Street Address</b>					<b>Street Address</b>			
514 Newport Ave					514 Newport Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02861-3612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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			
	Anthony		Desisto		Anthony Desisto Law Associates			
<b>Street Address</b>					<b>Street Address</b>			
4 Oxford Rd					450 Veterans Memorial Parkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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			
	Jeanne		Desmedt		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1498 Golf St					1498 Golf St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scotch Plains					Scotch Plains		NJ	07076

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Lisa		Desposito		Lisa Violetto, Inc			
<b>Street Address</b>					<b>Street Address</b>			
878 Alvarado St					3932 24th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94114

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		12.50

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Daniel		Dess		NSSI, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
514 West 17th St					PO Box 34042			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Houston					Houston		TX	77234

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Ivan		Deutsch		Sullivan & Cromwell LLP			
<b>Street Address</b>					<b>Street Address</b>			
32 N. Wood Ln					125 Broad St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woodmere					New York		NY	10004-2400

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Laura		DeVault		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
11114 Little High St					11114 Little High St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlottesville					Charlottesville		VA	22902

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Aashish	D.	Devitre		Retired		
<b>Street Address</b>					<b>Street Address</b>		
211 Central Park West, #10G					211 Central Park West, #10G		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024	New York	NY	10024

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Elaine		Diamond		Temple Isaiah		
<b>Street Address</b>					<b>Street Address</b>		
2001 Holmby Ave					10345 W. Pico Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Los Angeles			CA	90025	Los Angeles	CA	90025

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Doreen		DiBiagio		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
236 50th Ave N					236 50th Ave N		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saint Petersburg			FL	33703	Saint Petersburg	FL	33703

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/01/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		DiCenso		Maro Display, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
45 Briarbrooke Ln					112 Dillabur Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-2110	North Kingston	RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/21/2017		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		
	Daryl		Dichek		Women's Health Center		
<b>Street Address</b>					<b>Street Address</b>		
101 Amigo Road					250 Locust St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Soquel			CA	95073	Santa Cruz	CA	95060

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Peter	M.	Dickie		Pawtucket Hot Mix Asphalt			
<b>Street Address</b>					<b>Street Address</b>			
10 Rhode Island Ave					25 Concord St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	Muriel	M.	Dickinson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
246 Colonel John Gardner Rd					246 Colonel John Gardner Rd			
<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	06/08/2017		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			
	Anthony		DiFazio		A. DeFazio Construction			
<b>Street Address</b>					<b>Street Address</b>			
132 Shun Pike					132 Shun Pike			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/25/2017		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			
	Enrico		DiGregorio		DiGregorio, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
23 Fair Oaks Drive					23 Business Park Dr.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Smithfield		RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/25/2017		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			
	Tracy		DiGregorio		DiGregorio, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
23 Fair Oaks Dr					23 Business Park Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Smithfield		RI	02917



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Daniel	C.	Dileonardo		William Starck Architects, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
130 Touisset Ave					126 Cove St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Swansea					Fall River		MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/24/2017		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			
	Paul	J.	DiMaio		Grilli and DiMaio			
<b>Street Address</b>					<b>Street Address</b>			
215 Broadway					215 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-3017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Evelyn		DiMaria		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3640 Bronx Blvd., Apt 1A					3640 Bronx Blvd., Apt 1A			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bronx					Bronx		NY	10467

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/02/2017		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			
	Carol	G.	Dimeglio		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
290 Beechwood Dr					290 Beechwood Dr			
<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
	Check	Individual	05/30/2017		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			
	Lorraine	S.	Dimeo		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
364 Cromwell Court					364 Cromwell Court			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Naples					Naples		FL	34108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		400.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
T.	Paul		Dimeo		Dimeo Properties, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
475 Kilvert Street					475 Kilvert Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		
	Thomas	P	Dimeo		Retired		
<b>Street Address</b>					<b>Street Address</b>		
364 Cromwell Ct					364 Cromwell Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Naples			FL	34108	Naples	FL	34108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/15/2017		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		
	Deborah		Dinardo		Patridge, Snow and Hahn		
<b>Street Address</b>					<b>Street Address</b>		
287 Nayatt Rd					180 South Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/16/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul	E.	Dinino		Cornerstone Government Affairs		
<b>Street Address</b>					<b>Street Address</b>		
9216 Levelle Dr					300 Independence Ave SDE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chevy Chase			MD	20815	Washington	DC	20003-1021

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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		
	Tod	S.	Dionne		Apple Valley Alarms		
<b>Street Address</b>					<b>Street Address</b>		
435 Saw Mill Rd					435 Saw Mill Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Scituate			RI	02857-2955	North Scituate	RI	02857-2955

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Quentin		Dixon		Texas A&M University		
<b>Street Address</b>					<b>Street Address</b>		
31 Flagstone Path					400 Bizzell St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Spring			TX	77381	College Station	TX	77843

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Irene		Dobbins		Retired		
<b>Street Address</b>					<b>Street Address</b>		
350 Buckingham Way, Apt 202					350 Buckingham Way, Apt 202		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94132	San Francisco	CA	94132

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jeffrey	E	Dodge		Jeffrey E. Dodge, DMD		
<b>Street Address</b>					<b>Street Address</b>		
45 Payson Street					1438 Park Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Attleboro			MA	02703	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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		
	Peter		Dolan		PR Dolan LLC		
<b>Street Address</b>					<b>Street Address</b>		
60 Beach Drive					4 Beach Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Little Compton			RI	02837	Larchmont	NY	10001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/25/2017		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		
	Janine		Dolezel		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
20262 12th Ave NE					20262 12th Ave NE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Poulsbo			WA	98370	Poulsbo	WA	98370

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patrick	PJ	Donaghy		Structure Tone, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
70 Lamberson St					330 W. 34th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Valley Stream					New York		NY	10001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Mary		Donovan		Dobbs Ferry Historical Society			
<b>Street Address</b>					<b>Street Address</b>			
152 Broadway, #8					12 Elm St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Dobbs Ferry					Dobbs Ferry		NY	10522

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		60.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Priscilla		Douglas		Retired			
<b>Street Address</b>					<b>Street Address</b>			
241 Wormwood Hill Rd					241 Wormwood Hill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mansfield Center					Mansfield Center		CT	06250

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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	H.	Douglass		Viaduct Advisors, LLC			
<b>Street Address</b>					<b>Street Address</b>			
One Richmond Square, Ste 125					One Richmond Square, Ste 125			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02906-5159

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/16/2017		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			
	Katie	P.	Dove		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
2925 St. Michael Dr								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Missoula							MT	59803-2918

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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		Dragone		A Fine Tune Piano		
<b>Street Address</b>					<b>Street Address</b>		
10 Algonquin Drive					10 Algonquin Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Middletown			RI	02842	Middletown	RI	02842

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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	A.	Duffy		Retired		
<b>Street Address</b>					<b>Street Address</b>		
300 Seminole Ave, Apt 2C					300 Seminole Ave, Apt 2C		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Palm Beach			FL	33480-3772	Palm Beach	FL	33480-3772

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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		
	Jonathan		Duffy		Duffy & Shanley		
<b>Street Address</b>					<b>Street Address</b>		
33 Alfred Drown Rd					10 Charles St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806-1805	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		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		
	Elizabeth		Duquesnoy		Retired		
<b>Street Address</b>					<b>Street Address</b>		
146 North Bellefield Ave, #1004					146 North Bellefield Ave, #1004		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pittsburgh			PA	15213-2626	Pittsburgh	PA	15213-2626

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Filomena	M	Duquette		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2 Rocky Hill Road					2 Rocky Hill Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rehoboth			MA	02769	Rehoboth	MA	02769

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Normand	R.	Duquette		Providence Auto Body			
<b>Street Address</b>					<b>Street Address</b>			
2 Rocky Hill Road					350 Silver Spring St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rehoboth					Providence		RI	02904-2558

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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			
	Kevin	P.	Durkin		Clifford Law Office			
<b>Street Address</b>					<b>Street Address</b>			
120 N. La Salle St, Ste 3100					120 North LaSalle St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60602

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/25/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Stephen	A.	Duvel		Gilbane Co.			
<b>Street Address</b>					<b>Street Address</b>			
8 Milton Road					7 Jackson Wlkwy			
<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	04/11/2017		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			
	Neva	R.	Dyer		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
235 Berry St, #516					235 Berry St, #516			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94158

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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	J.	Dykeman		Greenberg Traurig LLP			
<b>Street Address</b>					<b>Street Address</b>			
12 Stedman St, #3					One International Place			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brookline					Boston		MA	02110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Toby	S.	Dyner		Self-Employed Physician			
<b>Street Address</b>					<b>Street Address</b>			
354 Moultrie St					354 Moultrie St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94110-5619

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Ellen	C.	Eagan		Retired			
<b>Street Address</b>					<b>Street Address</b>			
149 Santa Maria Ave					149 Santa Maria Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Bruno					San Bruno		CA	94066

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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			
	Lalor	M.	Earle		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
119 Canterbury Rd								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Danville					Danville		VA	24541

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Katherine		Girton Eaton		Unemployed			
<b>Street Address</b>					<b>Street Address</b>			
600 Waterford Way					600 Waterford Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Eugene					Eugene		OR	97401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Paul	B.	Edgerley		VantEdge Partners			
<b>Street Address</b>					<b>Street Address</b>			
119 Hyslop Rd					9401 Indian Creek Pkwy, Ste 800			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brookline					Overland Park		MA	02445-5727

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Sandra		Ederley		Hexagon Properties			
<b>Street Address</b>					<b>Street Address</b>			
119 Hyslop Rd					29 Commonwealth Ave, Fl 11			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brookline					Boston		MA	02116-2349

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Jane		Edgerton		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2801 New Mexico Ave NW, #1003					2801 New Mexico Ave NW, #1003			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20007

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Emily		Edmond		Aspen School District			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 5523					235 High School Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Snowmass Village					Aspen		CO	81611

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		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			
	Mitchell		Edwards		Hinckley Allen & Synder			
<b>Street Address</b>					<b>Street Address</b>			
39 Blueberry Ln					100 Westminster St, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Cris		Eggers		Communique Interpreting Services			
<b>Street Address</b>					<b>Street Address</b>			
319 Lomitas Lane					330 College Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Santa Rosa					Santa Rosa		CA	95401



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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		
	Henry		Ehrlich		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
2218 Burdett Ave. Apt. 318							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Troy			NY	12180			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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		
	Lara		Eid		EID Management		
<b>Street Address</b>					<b>Street Address</b>		
9 West Ridge Dr					9 West Ridge Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878-4496	Tiverton	RI	02878-4496

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		Einhorn		Greenlight Capital, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
140 E 45th St					140 E 45th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10017-7142	New York	NY	10017-7142

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Winnie		Eke		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5 Fensmere Rd					5 Fensmere Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Roxbury			MA	02132	West Roxbury	MA	02132

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Leslie		Ekings		Leslie Ekings, LICSW		
<b>Street Address</b>					<b>Street Address</b>		
36 Bolton Rd					257 Ayer Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Harvard			MA	01451	Harvard	MA	01451

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Patricia	Y.	Eldredge		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1727 El Vista Cir					1727 El Vista Cir		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Arcadia			CA	91006	Arcadia	CA	91006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Anne	L.	Elliott		Self-Employed Artist		
<b>Street Address</b>					<b>Street Address</b>		
2775 Main Street					2775 Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lawrenceville			NJ	08648	Lawrenceville	NJ	08648

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Patricia	S.	Elvebak		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
650 Oakdale Ave					650 Oakdale Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Corte Madera			CA	94925	Corte Madera	CA	94925

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/19/2017		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		
	Elaine		Emling		Retired		
<b>Street Address</b>					<b>Street Address</b>		
8901 Sudbury Rd					8901 Sudbury Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Silver Spring			MD	20901	Silver Spring	MD	20901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Liz		Enagonio		Kennedy Krieger		
<b>Street Address</b>					<b>Street Address</b>		
12113 Long Ridge Lane					707 North Broadway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bowie			MD	20715	Baltimore	MD	21205

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Kathleen		Engelberg		Self-Employed Therapist		
<b>Street Address</b>					<b>Street Address</b>		
2567 Day Sailor Ct					2567 Day Sailor Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Richmond			CA	94804	Richmond	CA	94804

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Randall		Engle		Georgia Tech		
<b>Street Address</b>					<b>Street Address</b>		
1103 Bromley Road					North Ave NW		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Avondale Estates			GA	30002	Atlanta	GA	30332

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/27/2017		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		
	Robin	C.	Erban		Citizens Bank		
<b>Street Address</b>					<b>Street Address</b>		
239 Sweet Allen Farm Rd					One Citizens Plaza		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Nancy		Erman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
43200 E. Oakside Pl					43200 E. Oakside Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Davis			CA	95618	Davis	CA	95618

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Jeanine		Ernst		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
6433 Renwick Cir					6433 Renwick Cir		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tampa			FL	33647-1173	Tampa	FL	33647-1173

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Jeanine		Ernst		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
6433 Renwick Cir					6433 Renwick Cir		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tampa			FL	33647-1173	Tampa	FL	33647-1173

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Steven		Ernst		Cushman & Wakefield		
<b>Street Address</b>					<b>Street Address</b>		
6433 Renwick Cir					1 Davol Sq #100		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tampa			FL	33647-1173	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	R.	Esposito		Esposito Jewelry		
<b>Street Address</b>					<b>Street Address</b>		
33 Cushing Street					225 Dupont Dr # 1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Winson	D.	Ewing		Retired		
<b>Street Address</b>					<b>Street Address</b>		
4174 Timberline Rd					4174 Timberline Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Clinton			WA	98236	Clinton	WA	98236

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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		
	Anke		Faber		Wicklow Capital, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
737 N. Michigan Ave					53 Jackson Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611-5641	Chicago	IL	60604

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Michael		Farey		Retired			
<b>Street Address</b>					<b>Street Address</b>			
15 Dow Lane					15 Dow Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Novato					Novato		CA	94947

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Lamis		Faris		Retired			
<b>Street Address</b>					<b>Street Address</b>			
404 Roosevelt Ave					404 Roosevelt Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Central Falls					Central Falls		RI	02863-3163

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/09/2017		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			
	Malcom		Farmer	III	Hinckly Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
190 Upton Avenue					50 Kennedy Plaza, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Margaret	D.	Farrell		Hinckley Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
27 Jennys Lane					50 Kennedy Plaza, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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	A.	Farrell		Brown Rudnick			
<b>Street Address</b>					<b>Street Address</b>			
11 Sefton Drive					10 Memorial Boulevard			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		MichaeFarrell		Brown Rudnick		
<b>Street Address</b>					<b>Street Address</b>		
11 Sefton Dr					10 Memorial Blvd.		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston		RI		02905-5128	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	William		MichaeFarrell		Brown Rudnick		
<b>Street Address</b>					<b>Street Address</b>		
11 Sefton Dr					10 Memorial Blvd.		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston		RI		02905-5128	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Stephanie	L	Federico		Capitol City Group		
<b>Street Address</b>					<b>Street Address</b>		
42 Hudson St					260 West Exchange St, Ste 100		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence		RI		02909	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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.	Fernandes		DCYF		
<b>Street Address</b>					<b>Street Address</b>		
39 Leslie Dr					101 Friendship St		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence		RI		02908-1916	Providence	RI	02903-3716

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	H	Ferrara		Taft & McSally		
<b>Street Address</b>					<b>Street Address</b>		
170 Beechwood Dr					21 Garden City Drive		
<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	05/09/2017		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		
	Lisa	A	Ferrara		Taft and McSally, LLP, GMO, LLC		
<b>Street Address</b>					<b>Street Address</b>		
170 Beechwood Dr					21 Garden City Dr		
<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	06/08/2017		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		
	Dale	A.	Ferris		Ferris Realty		
<b>Street Address</b>					<b>Street Address</b>		
343 Stewart St					57 N. Main St, #2A		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fall River			MA	02720	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Clairan		Ferrono		Fiber Artists Coalition		
<b>Street Address</b>					<b>Street Address</b>		
5432 South Dorchester Avenue					5432 South Dorchester Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60615	Chicago	IL	60615

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Tonya	M.	Ferrucci		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
61 Lowes Ln					61 Lowes Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chepachet			RI	02814-2205	Chepachet	RI	02814-2205

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/02/2017		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		
	Howard		Fiddle		CBRE		
<b>Street Address</b>					<b>Street Address</b>		
3 Clder Mill Ln					200 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Salem			NY	10560-3418	New York	NY	10166

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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			
	Jaimie		Field		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1520 Monk Rd					1520 Monk Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Gladwyne					Gladwyne		PA	19035

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	Adrienne		Fields		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3900b Watson Pl NW, Apt 1D					3900b Watson Pl NW, Apt 1D			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20016

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Alison		Fields		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
2737 Devonshire Place NW					2737 Devonshire Place NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20008

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Kenneth	J.	Filarski		Filarski Architecture Planning & Research			
<b>Street Address</b>					<b>Street Address</b>			
39 Perennial Dr					PO Box 3210			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02909-0210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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			
	Judith		Finlay		PRA Health Sciences			
<b>Street Address</b>					<b>Street Address</b>			
2857 Copley Ave					1455 Frazee Rd, #900			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Diego					San Diego		CA	92108



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Ryan	D.	Finnegan		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
29 Sugar Maple Dr					29 Sugar Maple Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Coventry					Coventry		RI	02816

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Sean	W.	Finnegan		Coventry Lumbar			
<b>Street Address</b>					<b>Street Address</b>			
29 Sugar Maple Dr					2030 Nooseneck Hill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Coventry					Coventry		RI	02816

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	William	D.	Finnegan		Coventry Lumbar			
<b>Street Address</b>					<b>Street Address</b>			
29 Sugar Maple Dr					2030 Nooseneck Hill Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Coventry					Coventry		RI	02816

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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	C	Finneran		Evans Law & Assoc.			
<b>Street Address</b>					<b>Street Address</b>			
42 Eighth Street, Suite 1410					65 Central Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					Georgetown		MA	01833

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/09/2017		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			
	Roland	J	Fiore		Fiore Resource Industries			
<b>Street Address</b>					<b>Street Address</b>			
571 Main St.					170 Fiore Industrial Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wakefield					Wakefield		RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/12/2017		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		
	Roland	J	Fiore		Fiore Resource Industries		
<b>Street Address</b>					<b>Street Address</b>		
571 Main St.					170 Fiore Industrial Dr		
<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	06/15/2017		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		
	William		Fish	Jr.	Hnickley, Allen & Snyder		
<b>Street Address</b>					<b>Street Address</b>		
50 Kennedy Plz, Suite 1500					50 Kennedy Plz, Suite 1500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/15/2017		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		
	Dorothy	L.	Fishman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
400 Forge Rd					400 Forge Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852-1052	North Kingstown	RI	02852-1052

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		Fisler		Retired		
<b>Street Address</b>					<b>Street Address</b>		
34 Luzon Ave					34 Luzon Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
ProvidenceProvidence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Pam		Flanders		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1067 S. Lansing Ave					1067 S. Lansing Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sturgeon Bay			WI	54235	Sturgeon Bay	WI	54235

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/19/2017		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		
	Lis	L.	Fleming		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1107 Halifax Ave					1107 Halifax Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Davis			CA	95616	Davis	CA	95616

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Gordon	W.	Fletcher		Arden Engineering		
<b>Street Address</b>					<b>Street Address</b>		
252 Wickford Point Rd					505 Narraganset Park Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	Pawtucket	RI	02861

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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		
	Rich		Flinn		Naval Academy Preparatory School		
<b>Street Address</b>					<b>Street Address</b>		
26 East Manning St					440 Meyerkord Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Newport	RI	02841

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/12/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John	S	Foley		Foley Cerilli P.C.		
<b>Street Address</b>					<b>Street Address</b>		
43 Highland Rd					56 Pine St, Ste 200		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878-4409	Providence	RI	02903-2819

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas	J.	Foley		Mortgage Center of New England		
<b>Street Address</b>					<b>Street Address</b>		
640 West Main Rd					175 Metro Center Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Little Compton					Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		500.00

**In Kind/Other Receipts Description**

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

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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		
	Sarah		Foster		Retired		
<b>Street Address</b>					<b>Street Address</b>		
400 Seabury Drive, Apt 4172					400 Seabury Drive, Apt 4172		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bloomfield			CT	06002	Bloomfield	CT	06002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Julie		Fouquet		Retired		
<b>Street Address</b>					<b>Street Address</b>		
48 Hillbrook Dr					48 Hillbrook Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Portola Valley			CA	94028	Portola Valley	CA	94028

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Lynne	S.	Fovinci		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1795 Oak Ave					1795 Oak Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Menlo Park			CA	94025	Menlo Park	CA	94025

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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	J	Fox	Jr.	H. Carr & Sons, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
7 Don Ave					100 Royal Little Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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			
	Terence	M.	Fracassa		Fracassa Law & Consulting			
<b>Street Address</b>					<b>Street Address</b>			
30 Withington Road					117 Metro Center Boulevard			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Teresa		Fraher		Teresa Fraher, Self-Employed			
<b>Street Address</b>					<b>Street Address</b>			
3498 Sawgrass Trl E					3498 Sawgrass Trl E			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saint Paul					Saint Paul		MN	55122

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Ann	L	Frank		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
25733 River Dr					25733 River Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Franklin					Franklin		MI	48025

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Joanne	A.	Frank		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1216 Yarmouth Rd					1216 Yarmouth Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wynnewood					Wynnewood		PA	19096

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Bruce		Franklin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
11 Oakland Ave					11 Oakland Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rockport					Rockport		MA	01966

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/15/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patrick		Fransson		Fransson Landscapes LLC		
<b>Street Address</b>					<b>Street Address</b>		
2 Bailey Terrace					PO Box 282		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Middletown			RI	02842-4904	Newport	RI	02840-0003

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/18/2017		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		
	Shirley		Fredericks		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
9755 E. Bush Hill Pl					9755 E. Bush Hill Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tucson			AZ	85749	Tucson	AZ	85749

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/15/2017		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		
	Donald	R.	Frederico		Pierce Atwood LLP		
<b>Street Address</b>					<b>Street Address</b>		
27 Stoneybrook Road					72 Pine Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sherborn			MA	01770	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/08/2017		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		Freeman		Greyfields Investors		
<b>Street Address</b>					<b>Street Address</b>		
10 Courageous Cir							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809-1007			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		
	Mary		Freyer		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
3016 Riverside Park Rd					3016 Riverside Park Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Orlando			FL	32810	Orlando	FL	32810

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Ruth		Freymann		Retired		
<b>Street Address</b>					<b>Street Address</b>		
355 Blackstone Blvd.					355 Blackstone Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Lori		Friedman		Genentech, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
417 Hillcrest Rd					1 DNA Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Carlos			CA	94070	South San Francisco	CA	94080

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Janice		Friesen		Janice Friesen, Self-Employed Clinical Social Worker		
<b>Street Address</b>					<b>Street Address</b>		
5490 Jensen Rd					5490 Jensen Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Castro Valley			CA	94552	Castro Valley	CA	94552

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Terry		Frishman		Culinest		
<b>Street Address</b>					<b>Street Address</b>		
20 West 84th Street					20 West 84th Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024	New York	NY	10024

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Deborah		Fuller		Retired		
<b>Street Address</b>					<b>Street Address</b>		
64 Woodbury HI					64 Woodbury HI		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Woodbury			CT	06798	Woodbury	CT	06798

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		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			
	Thomas	E.	Furey		Furey Roofing			
<b>Street Address</b>					<b>Street Address</b>			
73 Secluded Drive					73 Secluded Drive			
<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	05/11/2017		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			
	Mario	J.	Furtado		Clean Air			
<b>Street Address</b>					<b>Street Address</b>			
30 Brentwood Drive					40 Minnesota Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rumford					North Kingstown		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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			
	Gregory	A	Gabel		Auto Body Concepts			
<b>Street Address</b>					<b>Street Address</b>			
114C Phillips Lane					46 Terry Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Harmony					Chepachet		RI	02814-2159

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Charla		Gabert		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
150 Castle Crest Rd					150 Castle Crest Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Alamo					Alamo		CA	94507

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	J.	Gagne		Suburban Integrated Facilities Resources			
<b>Street Address</b>					<b>Street Address</b>			
27 Marion St					65 Bay State Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Braintree		MA	02184



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Rich		Gailey		Washington Permenente Medical Group		
<b>Street Address</b>					<b>Street Address</b>		
2835 36th Ave NE					320 Westlake Ave N #100		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Olympia			WA	98506	Seattle	WA	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Jane		Gale		GreenGale Publishing		
<b>Street Address</b>					<b>Street Address</b>		
6722 N. Rainbow Blvd					610 S. 7th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Las Vegas			NV	89131	Las Vegas	NV	89101

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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.	Gallaher		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2002 Echo Springs Cir					2002 Echo Springs Cir		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
St. George			UT	84790	St. George	UT	84790

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael	A.	Galligan		Consolidated Concrete		
<b>Street Address</b>					<b>Street Address</b>		
34 Anoka Rd					835 Taunton Ave, #1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02889	East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/16/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Richard	T.	Gallone		Law Offices of Richard Gallone, PC		
<b>Street Address</b>					<b>Street Address</b>		
1105 Town Farm Rd					1105 Town Farm Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Coventry			RI	02816-5028	Coventry	RI	02816-5028

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		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		
	Benjamin		Galpen		1947 LLC		
<b>Street Address</b>					<b>Street Address</b>		
208 Clock Tower Square					208 Clock Tower Square		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Portsmouth			RI	02871-1397	Portsmouth	RI	02871-1397

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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		
	Deborah		Galvin		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
41 Bear Hill Road					41 Bear Hill Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Seekonk			MA	02771	Seekonk	MA	02771

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Edward	J	Galvin		Galvin and Associates, LLC		
<b>Street Address</b>					<b>Street Address</b>		
41 Bear Hill Rd					320 Newport Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Seekonk			MA	02771	Rumford	RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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		
	Edward	J	Galvin		Galvin and Associates, LLC		
<b>Street Address</b>					<b>Street Address</b>		
41 Bear Hill Rd					320 Newport Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Seekonk			MA	02771	Rumford	RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	John	R.	Galvin		AAA		
<b>Street Address</b>					<b>Street Address</b>		
82 Jeffrey Dr					110 Royal Little Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Attleboro			MA	02760	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	John	R.	Galvin		AAA			
<b>Street Address</b>					<b>Street Address</b>			
82 Jeffrey Dr					110 Royal Little Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Attleboro					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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	A.	Gamboli		Patridge, Snow and Hahn			
<b>Street Address</b>					<b>Street Address</b>			
14 Red Coat Lane					180 South Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Plainville					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		600.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Gary		Gandrud		Retired			
<b>Street Address</b>					<b>Street Address</b>			
13310 Carrick St					13310 Carrick St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saratoga					Saratoga		CA	95070

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Ganley		Buffalo State College			
<b>Street Address</b>					<b>Street Address</b>			
58 Fordham Dr					1300 Elmwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Buffalo					Buffalo		NY	14222

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/12/2017		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			
	Aram	G.	Garabedian		Bliss Properties			
<b>Street Address</b>					<b>Street Address</b>			
173 Belvedere Drive					245 Waterman St # 404			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Suzanne	E.	Gardner		Retired		
<b>Street Address</b>					<b>Street Address</b>		
214 Durose Ter					214 Durose Ter		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Madison			WI	53705	Madison	WI	53705

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Cathryn	E.	Garofalo		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
61 Canterbury Rd							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
South Kingstown			RI	02879			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Steven	B	Garofalo		Garofalo & Associates		
<b>Street Address</b>					<b>Street Address</b>		
61 Canterbury Rd					85 Corliss Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
South Kingstown			RI	02879	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Scott		Gaudreau		Cathedral Development Group, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
103 Tepee Trail					4 Cathedral Square		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-2214	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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		
	Juli		Gaylord		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3604 Piping Rock St					3604 Piping Rock St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Nacogdoches			TX	75965	Nacogdoches	TX	75965

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Jennifer	M.	Gehringer Puerini		Jennifer Gehringer Puerini, Esq.			
<b>Street Address</b>					<b>Street Address</b>			
61 Eustis Avenue					61 Eustis Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Newport					Newport		RI	02840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/27/2017		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			
	Jeffrey		Geiger		General Dynamics Electric Boat			
<b>Street Address</b>					<b>Street Address</b>			
3 Prospect St					75 Eastern Point Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mystic					Groton		CT	06340

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/21/2017		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			
	George	J.	Geisser		Geisser Engineering Corp.			
<b>Street Address</b>					<b>Street Address</b>			
94 Fairway Dr					227 Wampanoag Trl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Attleboro					Riverside		RI	02915-2211

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		1,000.00

**In Kind/Other Receipts Description**

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

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		Gentry		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
2817 Harris Blvd.					2817 Harris Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Austin					Austin		TX	78703

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Ana		Gerena		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
11091 Springfield Pl					11091 Springfield Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hollywood			FL	33026	Hollywood	FL	33026

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Wallace	B.	Gernt	Jr.	The Bradford Group		
<b>Street Address</b>					<b>Street Address</b>		
14 Wingate Road					205 Governor Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Phyllis	L.	Gestrin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3930 Connecticut Ave NW, Apt 501					3930 Connecticut Ave NW, Apt 501		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Washington			DC	20008	Washington	DC	20008

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/25/2017		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		
	Louis	R.	Giancola		South County Hospital		
<b>Street Address</b>					<b>Street Address</b>		
6 Barberry Hill Road					100 Kenyon Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Wakefield	RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/01/2017		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		
	Harry		Giannoulis		The Parkside Group LLC		
<b>Street Address</b>					<b>Street Address</b>		
240-25 43rd Ave					132 Nassau Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Douglaston			NY	11363-1830	New York	NY	10038

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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	A.	Giardino		Turino Group			
<b>Street Address</b>					<b>Street Address</b>			
55 Rock Way					434 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Robin		Gibbs		Brown University			
<b>Street Address</b>					<b>Street Address</b>			
365 Olney St					110 Elm Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02912

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Merrilyn		Gibson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
8811 Woodland Drive					8811 Woodland Drive			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Silver Spring					Silver Spring		MD	20910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/21/2017		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			
	Anton	P.	Giedt		IGT Global Solutions Corp.			
<b>Street Address</b>					<b>Street Address</b>			
163 Governor St					10 Memorial Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Martha		Gifford		Law Office of Martha Gifford			
<b>Street Address</b>					<b>Street Address</b>			
187 Hicks St					137 Montague St, #220			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					Brooklyn		NY	11201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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			
	Andre		Giguere		Retired			
<b>Street Address</b>					<b>Street Address</b>			
6193 Seagull Ln					6193 Seagull Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lakeland					Lakeland		FL	33809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Sara	B	Gilbane		Gilbane Building Company			
<b>Street Address</b>					<b>Street Address</b>			
575 Island Drive					7 Jackson Walkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Palm Beach					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	William	J.	Gilbane		Gilbane Building Co.			
<b>Street Address</b>					<b>Street Address</b>			
91 Lighthouse Dr					661 University Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jupiter					Jupiter		FL	33458-2795

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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			
	Thomas	F	Gilbane	Jr.	Gilbane Building Co.			
<b>Street Address</b>					<b>Street Address</b>			
20 Leroy Avenue					7 Jackson Walkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Newport					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	M	Gilden	Esq.	Patridge, Snow and Hahn			
<b>Street Address</b>					<b>Street Address</b>			
21 Britts Ridge					180 South Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Providence		RI	02903



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Denise		Gill		South Pasadena Unified School DISTRICT		
<b>Street Address</b>					<b>Street Address</b>		
324 Milton Dr					1020 El Centro St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Gabriel			CA	91775	South Pasadena	CA	91030

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		
	MaryAnne		Gilmartin		Forest City Ratner Companies		
<b>Street Address</b>					<b>Street Address</b>		
113 Saint Johns Pl					1 Metrotech Ctr, #22		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brooklyn			NY	11217-3401	Brooklyn	NY	11201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/21/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John	J	Gilroy		Gilbane		
<b>Street Address</b>					<b>Street Address</b>		
1671 Kingstown Rd					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Peacedale			RI	02879	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	J.	Giordano		Gordon R. Archibald, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
1 Henry Dr					200 Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806-2523	Pawtucket	RI	02860-4131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Robert	D.	Giudici		Ward Fisher and Company		
<b>Street Address</b>					<b>Street Address</b>		
35 Teakwood Dr.					250C Centerville Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919-2364	Warwick	RI	02886-4353

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Donald	G.	Giumetti		Shepard Group, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 1440					822 American Legion Highway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport					Westport		MA	02790

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/26/2017		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			
	Andrew		Glashow		New World Merchant Partners			
<b>Street Address</b>					<b>Street Address</b>			
115 Kane Ave					670 Post Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Middletown					Scarsdale		NY	10583

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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			
	Catherine		Gleason		Commonwealth Engineers & Consultants, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
6 Spring St					400 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Franklin					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Mildred		Glimcher		Pace Gallery			
<b>Street Address</b>					<b>Street Address</b>			
435 East 52nd St					32 E 57th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10022

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/07/2017		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			
	Frederick		Godley		University Otolaryngology			
<b>Street Address</b>					<b>Street Address</b>			
28 Lands End Dr					845 North Main St.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Providence		RI	02904-5700

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Carol	E.	Gohl		Coast Realty			
<b>Street Address</b>					<b>Street Address</b>			
18 Sylvan Ave					1 Realty Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Mary Kay		Gojkovich		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1044 E. 8th Ave					1044 E. 8th Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mesa					Mesa		AZ	85204

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		54.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ann		Gold		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
64 Chichester Rd					64 Chichester Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Monroe Twp					Monroe Twp		NJ	08831

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas		Goldberg		Goldberg Attorney at Law			
<b>Street Address</b>					<b>Street Address</b>			
226 Cottage Street					226 Cottage Street			
<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	06/14/2017		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	L.	Goldman		Governo Law Firm, LLC			
<b>Street Address</b>					<b>Street Address</b>			
Two International Place, FL 23					Two International Place, FL 23			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Boston		MA	02110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		Goldsmith		Aspiera Medical		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1					PO Box 2182		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Harmony			RI	02829-0001	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		Goldsmith		Aspiera Medical		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1					PO Box 2182		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Harmony			RI	02829-0001	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		Goldsmith		Aspiera Medical		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1					PO Box 2182		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Harmony			RI	02829-0001	Woonsocket	RI	02895

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Barbara	J.	Goode		Swedish Covenant Hospital		
<b>Street Address</b>					<b>Street Address</b>		
5437 N. Christiana Ave					5145 N. California Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60625	Chicago	IL	60625

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Mary Ellen		Goodwin		State of Rhode Island		
<b>Street Address</b>					<b>Street Address</b>		
325 Smith Street					82 Smith Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02908	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		
	Eric		Gordon		Long View Publishing		
<b>Street Address</b>					<b>Street Address</b>		
9514 National Blvd.					3940 High St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Los Angeles			CA	90034	Oakland	CA	94619

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		
	Douglas	J.	Goss		The Plumber Co.		
<b>Street Address</b>					<b>Street Address</b>		
440 Central Ave					1 Starline Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	01919-4710	Cranston	RI	02921-3447

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/14/2017		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		
	Charlotte	P.	Gosselink		Retired		
<b>Street Address</b>					<b>Street Address</b>		
108 Crosslands Drive					108 Crosslands Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kennett Square			PA	19348	Kennett Square	PA	19348

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Jeanne		Gottfried		The Education Cooperative		
<b>Street Address</b>					<b>Street Address</b>		
174 8th St					TEC 141 Mansion Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	East Walpole	MA	02062

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Ruth		Gottlieb		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3300 Dary Rd					3300 Dary Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Haverford			PA	19041	Haverford	PA	19041

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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			
	Scott	L.	Gottlieb		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
52 Garden Rd					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scarsdale					New York		NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/26/2017		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			
	Philip		Gould		Brown University			
<b>Street Address</b>					<b>Street Address</b>			
7 Cooke Street					45 Prospect Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02912

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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	R.	Gowell	Jr.	Pannone Lopes Devereaux & West			
<b>Street Address</b>					<b>Street Address</b>			
35 Watch Hill					317 Iron Horse Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02908-5600

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Janice	D.	Grackin		Retired			
<b>Street Address</b>					<b>Street Address</b>			
76 Warren Ave					76 Warren Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Ronkonkor					Ronkonkor		NY	11779

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Gay		Graham		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 2447					PO Box 2447			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Friday Harbor					Friday Harbor		WA	98250

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/25/2017		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			
	Albert		Grand		Retired			
<b>Street Address</b>					<b>Street Address</b>			
933 Lawrence Ct					933 Lawrence Ct			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Bellmore					North Bellmore		NY	11710-1057

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Frederick		Granoff		Eastern Wire Products Co.			
<b>Street Address</b>					<b>Street Address</b>			
116 East Hill Dr					498 Kinsley Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donna		Grant		Donna Grant, Self-Employed Therapist			
<b>Street Address</b>					<b>Street Address</b>			
328 Rockingham Street					328 Rockingham Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rochester					Rochester		NY	14620

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		Graves		Bryant University			
<b>Street Address</b>					<b>Street Address</b>			
213 Harris Ave					1150 Douglas Turnpike			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woonsocket					Smithfield		RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	David	M.	Gravino		Iggy's Doughboy & Chowderhouse			
<b>Street Address</b>					<b>Street Address</b>			
41 Rhode Island Ave					889 Oakland Breach Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02889

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Madelaine	S.	Gray		Self-Employed Photographer		
<b>Street Address</b>					<b>Street Address</b>		
3201 Woodberry Ln					3201 Woodberry Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sarasota			FL	34231	Sarasota	FL	34231

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Donna		Green		Retired		
<b>Street Address</b>					<b>Street Address</b>		
135 Burro Back Ct					135 Burro Back Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cotopaxi			CO	81223	Cotopaxi	CO	81223

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Stephen	L.	Green		SL Green Realty Corp.		
<b>Street Address</b>					<b>Street Address</b>		
845 United Nations Plaza, Apt 65B					420 Lexington Ave, Fl 19		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10017-3538	New York	NY	10170-1999

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		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		
	Tucker		Green		Tucker Green Consulting, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
127 Harrison Ave					127 Harrison Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New Canaan			CT	06840	New Canaan	CT	06840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Kenneth	S.	Green	Jr.	Retired		
<b>Street Address</b>					<b>Street Address</b>		
3705 N.E. 17th St					3705 N.E. 17th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Ocala			FL	34470	Ocala	FL	34470



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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	S.	Greenbaum		Pure Beverage Systems, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
332 Cole Ave					1015 Waterman Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					East Providence		RI	02914-1314

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Steven		Greenbaum		Mark Greenberg Real Estate Co., LLC			
<b>Street Address</b>					<b>Street Address</b>			
718 Longacre Ave					1981 Marcus Ave, Ste C131			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woodmere					Lake Success`		NY	11042

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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			
	Mary		Greene		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4 Centerville Ln, #2B					4 Centerville Ln, #2B			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Belingham					Belingham		MA	02019

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Vincent	L.	Greene		Motley Rice LLC			
<b>Street Address</b>					<b>Street Address</b>			
5 Country Club Way					321 S Main St # 200			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Norton					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/06/2017		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			
	Mark	S.	Greenleaf		Commonwealth Engineers & Consulting, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
4 Round Hill Rd					400 Smith St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Foster					Providence		RI	02908-3727

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Joan	F.	Greenwell		Starkweather and Shepley		
Street Address					Street Address		
304 Church Pond Dr					60 Catamore Blvd		
City		State	Zip		City	State	Zip
Tiverton		RI	02878-4455		East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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		
	Joan	F.	Greenwell		Starkweather and Shepley		
Street Address					Street Address		
304 Church Pond Dr					60 Catamore Blvd		
City		State	Zip		City	State	Zip
Tiverton		RI	02878-4455		East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Elizabeth		Gregory		Worcester Regional Association of Realtors		
Street Address					Street Address		
20 Nanigian Lane					492 Washington St		
City		State	Zip		City	State	Zip
Paxton		MA	01612		Auburn	MA	01501

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	John		Gregory		Northern RI Chamber of Commerce		
Street Address					Street Address		
58 Church St					6 Blackstone Valley Pl # 301		
City		State	Zip		City	State	Zip
Slatersville		RI	02876		Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael	A	Grieco	Sr	Metro Motor Group		
Street Address					Street Address		
12 Dario Dr					1651 New State Hwy.		
City		State	Zip		City	State	Zip
Lincoln		RI	02865		Raynham	MA	02767

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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			
	Jerome		Grieder		Retired			
<b>Street Address</b>					<b>Street Address</b>			
31 Linden Road					31 Linden Road			
<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
	Credit/Debit Card	Individual	04/28/2017		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			
	Jerome		Grieder		Retired			
<b>Street Address</b>					<b>Street Address</b>			
31 Linden Road					31 Linden Road			
<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
	Credit/Debit Card	Individual	06/28/2017		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			
	Jerome		Grieder		Retired			
<b>Street Address</b>					<b>Street Address</b>			
31 Linden Road					31 Linden Road			
<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	04/27/2017		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			
	Wayne	J.	Griffin		Wayne J Griffin Electric Inc			
<b>Street Address</b>					<b>Street Address</b>			
2 Briar Lane					116 Hopping Brook Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Medway					Holliston		MA	01746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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	E.	Griffin	Jr.	South County Hospital			
<b>Street Address</b>					<b>Street Address</b>			
100 Exchange St, Unit 1803					100 Kenyon Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Wakefield		RI	02879

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Mark	H.	Grimm		Marasco & Nesselbush, LLP			
<b>Street Address</b>					<b>Street Address</b>			
60 Spectacle Ave					685 Westminster St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Mary		Gristina		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
38 Belden Hill Ln					38 Belden Hill Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wilton					Wilton		CT	06897

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Elaine	J.	Gross		Retired			
<b>Street Address</b>					<b>Street Address</b>			
732 Springfield Ave					732 Springfield Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Summit					Summit		NJ	07901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		Gross		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
200 East 27th St					200 East 27th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10016

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	James		Grout		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3 Fara Dr					3 Fara Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Stamford					Stamford		CT	06905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Margaret		Grubbs		Retired			
Street Address					Street Address			
1382 Newtown Langhorne Road					1382 Newtown Langhorne Road			
City		State	Zip		City		State	Zip
Newtown		PA	18940		Newtown		PA	18940

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		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			
	Holly		Guimond		Homemaker			
Street Address					Street Address			
4 Stanhope Dr					4 Stanhope Dr			
City		State	Zip		City		State	Zip
Barrington		RI	02806-1618		Barrington		RI	02806-1618

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/13/2017		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			
	Holly		Guimond		Homemaker			
Street Address					Street Address			
4 Stanhope Dr					4 Stanhope Dr			
City		State	Zip		City		State	Zip
Barrington		RI	02806-1618		Barrington		RI	02806-1618

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/13/2017		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			
	Jefferson		Guimond		Patrick Lynch Group			
Street Address					Street Address			
4 Stanhope Drive					One Park Row			
City		State	Zip		City		State	Zip
Barrington		RI	02806		Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Scott	D.	Gunn		IGT / GTech			
Street Address					Street Address			
130 Prospect Street					10 Memorial Blvd.			
City		State	Zip		City		State	Zip
Providence		RI	02906		Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Merrily		Haas		Oregon Association for Education of Children		
<b>Street Address</b>					<b>Street Address</b>		
20887 SW Willapa Way					PO Box 60		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tualatin			OR	97062	Gladstone	OR	97027

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/21/2017		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		
	Adam		Haber		LI Consulting Services		
<b>Street Address</b>					<b>Street Address</b>		
35 Crabapple Dr					835 Avenue of the Americas		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Roslyn			NY	11576-2300	New York	NY	10001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/21/2017		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		
	Renee		Haber		Renée Haber, MS, LMSW		
<b>Street Address</b>					<b>Street Address</b>		
35 Crabapple Dr					99 Hillside Ave, Suite J		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Roslyn			NY	11576-2300	Williston Park	NY	11596

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Mary		Hagerth		Self-Employed Artist		
<b>Street Address</b>					<b>Street Address</b>		
664 Las Lomas Ave					664 Las Lomas Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pacific Palisades			CA	90272	Pacific Palisades	CA	90272

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		Hahn		Partridge Snow & Hahn LLP		
<b>Street Address</b>					<b>Street Address</b>		
60 Agawam Park Road					180 South Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Elisabeth		Hale		The Hale Company, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
2731 Arrington Rd					2731 Arrington Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Arrington			VA	22922	Arrington	VA	22922

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/18/2017		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		
	Elsie		Haley		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1215 Milwaukee St					1215 Milwaukee St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Denver			CO	80206	Denver	CO	80206

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		Halkyard		Retired		
<b>Street Address</b>					<b>Street Address</b>		
33 Surf Dr					33 Surf Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809	Bristol	RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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		Halkyard		Retired		
<b>Street Address</b>					<b>Street Address</b>		
33 Surf Dr					33 Surf Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809	Bristol	RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Florence	R.	Hall		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1733 Kirby Rd, Apt 1403					1733 Kirby Rd, Apt 1403		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
McLean			VA	22101	McLean	VA	22101

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/21/2017		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		
	Joan		Hall		Retired		
<b>Street Address</b>					<b>Street Address</b>		
209 E Lake Shore Dr					209 E Lake Shore Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611	Chicago	IL	60611

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Lori		Hall		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3 E. 69th St					3 E. 69th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10021-4943	New York	NY	10021-4943

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Susan		Hall		Susan Hall, Massage Therapist		
<b>Street Address</b>					<b>Street Address</b>		
333 Central Ave					859 El Camino Real		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Menlo Park			CA	94025	Menlo Park	CA	94025

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/02/2017		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		
	Eileen		Hamper		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1300 Burrows Rd					1300 Burrows Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Campbell			CA	95008	Campbell	CA	95008

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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		Hansen		NHPRI		
<b>Street Address</b>					<b>Street Address</b>		
39 Rolens Dr					39 Rolens Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kingston			RI	02881-1760	Kingston	RI	02881-1760



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		55.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Kim		Hanson		South County Communication Consulting LLC		
<b>Street Address</b>					<b>Street Address</b>		
41 South Weeden Rd					41 South Weeden Rd		
<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	05/06/2017		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		
	Thomas	R.	Hardiman		Hillview Auto Body		
<b>Street Address</b>					<b>Street Address</b>		
13 Paine RD.					107 Railroad Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Foster			RI	02825-1439	Johnston	RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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		Harlam		Brown University		
<b>Street Address</b>					<b>Street Address</b>		
1256 Narragansett Blvd.					25 George St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02905-3821	Providence	RI	02912-9017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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		
	Bari		Harlam		CVS Caremark		
<b>Street Address</b>					<b>Street Address</b>		
1256 Narragansett Blvd.					1 CVS Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02905-3821	Woonsocket	RI	02895-6146

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		
	Linnet		Harlan		Retired		
<b>Street Address</b>					<b>Street Address</b>		
186 Cedar St					186 Cedar St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pacific Grove			CA	93950	Pacific Grove	CA	93950

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Julia	D.	Harper		Oracle			
<b>Street Address</b>					<b>Street Address</b>			
156 Cedar Ave					1 Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Arlington					Cambridge		MA	02142

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		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			
	Allison		Harrington		Harvard University			
<b>Street Address</b>					<b>Street Address</b>			
24 Keene St					26 Oxford St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Cambridge		MA	02138

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Chris		Harrington		Oregon Health & Science University (OHSU)			
<b>Street Address</b>					<b>Street Address</b>			
7095 SW Newton Pl					3181 SE Sam Jackson Park Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portland					Portland		OR	97239-3098

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/10/2017		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			
	Sheila		Harrington		Harrington Rhodes, Ltd			
<b>Street Address</b>					<b>Street Address</b>			
70 Webster Ave					2750 South County Trail			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					East Greenwich		RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Julie		Harris		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1208 Pine Street					1208 Pine Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New Orleans					New Orleans		LA	70118

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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		
	Nancy	S.	Harris		Retired		
<b>Street Address</b>					<b>Street Address</b>		
251 George St					251 George St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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		
	Betsy		Harrison		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 927					PO Box 927		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mancos			CO	81328	Mancos	CO	81328

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Susan		Hartman		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
24 Mather Ave					24 Mather 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
	Credit/Debit Card	Individual	04/01/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Tara		Haughney		Raising A Reader MA		
<b>Street Address</b>					<b>Street Address</b>		
32 Claffin Rd					9 Hamilton Place		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brookline			MA	02445	Boston	MA	02108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Carla		Hawkins		Metro Hartford Alliance		
<b>Street Address</b>					<b>Street Address</b>		
37 Kelsey Ln					31 Pratt St #5		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Glastonbury			CT	06033-5040	Hartford	CT	06103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		Hawkins		Cushman & Wakefield			
<b>Street Address</b>					<b>Street Address</b>			
37 Kelsey Ln					1 Davol Sq #100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Glastonbury					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		3.57

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Deborah		Hayes		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 1514					PO Box 1514			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Spotsylvania					Spotsylvania		VA	22553

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/26/2017		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			
	Evelyn		Haynes		Unemployed			
<b>Street Address</b>					<b>Street Address</b>			
2303 Owens Avenue					2303 Owens Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fort Collins					Fort Collins		CO	80528

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Michael		Healy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
13544 23rd Place NE					13544 23rd Place NE			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seattle					Seattle		WA	98125

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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			
	Keith	A.	Hebeisen		Clifford Law Offices			
<b>Street Address</b>					<b>Street Address</b>			
120 N. La Salle St, Ste 3100					120 N. La Salle St, Ste 3100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60602-2493

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/24/2017		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		
	Christie		Hefner		Canyon Ranch Enterprises		
<b>Street Address</b>					<b>Street Address</b>		
161 E. Chicago Ave, #42E					628 N State St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611	Chicago	IL	60654

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	John		Heimerdinger		Retired		
<b>Street Address</b>					<b>Street Address</b>		
13 Thornewood Rd					13 Thornewood Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Armonk			NY	10504	Armonk	NY	10504

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/25/2017		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		
	Betty		Heindel		Retired		
<b>Street Address</b>					<b>Street Address</b>		
23287 Blue Water Cir					23287 Blue Water Cir		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boca Raton			FL	33433	Boca Raton	FL	33433

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joy		Heitmann		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5021 Elaine Ave					5021 Elaine Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Raleigh			NC	27616	Raleigh	NC	27616

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Heitsch		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1224 W. Montana St, Apt 1					1224 W. Montana St, Apt 1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60614	Chicago	IL	60614

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		Helfand		Equity Commonwealth		
<b>Street Address</b>					<b>Street Address</b>		
1300 N. State Pkwy					2 North Riverside Plaza		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610-8654	Chicago	IL	60606

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Lisa		Perry Hellerstein		Community Health Care Association of NY		
<b>Street Address</b>					<b>Street Address</b>		
86 Stuyvesant Ave					111 Broadway, #1402		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Larchmont			NY	10538	New York	NY	10006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Catherine	F.	Helm		Self-Employed Attorney		
<b>Street Address</b>					<b>Street Address</b>		
227 S. Windsor Blvd.					227 S. Windsor Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Los Angeles			CA	90004	Los Angeles	CA	90004

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/09/2017		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		
	Carl		Helmetag		Espey Electronics and Mfg		
<b>Street Address</b>					<b>Street Address</b>		
339 Sea View Ave					339 Sea View Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverside			RI	02195	Riverside	RI	02195

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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		
	Ricia	M.	Hendrick		Elevator World Magazine		
<b>Street Address</b>					<b>Street Address</b>		
2313 Lantern Ln W					PO Box 6507		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mobile			AL	36693	Mobile	AL	36606

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/06/2017		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			
	Ann		Hendricks		Retired			
<b>Street Address</b>					<b>Street Address</b>			
29 Pond St					29 Pond St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Hopkinton					Hopkinton		MA 01748-1605	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		Henkel		Retired			
<b>Street Address</b>					<b>Street Address</b>			
570 Vista de la Ciudad					570 Vista de la Ciudad			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Santa Fe					Santa Fe		NM 87501	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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			
	Marie		Hennedy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Marion Street					56 Marion St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
East Greenwich					East Greenwich		RI 02818	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Marie		Hennedy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Marion Street					56 Marion St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
East Greenwich					East Greenwich		RI 02818	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/28/2017		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			
	Marie		Hennedy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Marion Street					56 Marion St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
East Greenwich					East Greenwich		RI 02818	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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			
	Marie		Hennedy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
56 Marion Street					56 Marion St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					East Greenwich		RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Lisa		Henry		Penfield Central School			
<b>Street Address</b>					<b>Street Address</b>			
482 Antlers Dr					2590 Atlantic Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rochester					Rochester		NY	14625

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		Herberger		Amgen			
<b>Street Address</b>					<b>Street Address</b>			
35 Signal Ridge Way					40 Technology Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					West Greenwich		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Janice	M.	Herdley		Retired			
<b>Street Address</b>					<b>Street Address</b>			
251 W. Tuna Dr					251 W. Tuna Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Green Valley					Green Valley		AZ	85614

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/16/2017		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			
	Sally		Herreid		Mortgage Network			
<b>Street Address</b>					<b>Street Address</b>			
76 Freeman Pkwy					155 South Main St, Suite 301			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Cheryl		Hess		Retired			
<b>Street Address</b>					<b>Street Address</b>			
550 Colusa Ave					550 Colusa Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Berkeley					Berkeley		CA	94707

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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			
	Marjorie	W.	Heumann		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1 Baldwin Ave					1 Baldwin Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Mateo					San Mateo		CA	94401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Mark		Hichar		Hinckley Allen & Snyder, LLP			
<b>Street Address</b>					<b>Street Address</b>			
549 Canton Street					100 Westminster St, #1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westwood					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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			
	Arthur	N.	Hicks	II	Analog Devices			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 610667					3550 N 1st St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Jose					San Jose		CA	95134

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	A.	Hidalgo	M.D.	David A. Hidalgo, M.D.			
<b>Street Address</b>					<b>Street Address</b>			
988 Fifth Ave					655 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10065-5937

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Roscoe		Higgins	Jr.	East Providence School Department		
<b>Street Address</b>					<b>Street Address</b>		
35 Harris St					80 Burnside Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverside			RI	02915-1738	Riverside	RI	02915

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patricia		Highberg		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 436					PO Box 436		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Woodstock			VT	05091	Woodstock	VT	05091

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Elizabeth	H.	Hinchlif		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1890 E. 107th St, Apt 616					1890 E. 107th St, Apt 616		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cleveland			OH	44106	Cleveland	OH	44106

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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		
	Virginia		Hirsch		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 250779					PO Box 250779		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Milwaukee			WI	53225	Milwaukee	WI	53225

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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		
	Virginia	J.	Hodgkinson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5904 Mount Eagle Dr, Apt 308					5904 Mount Eagle Dr, Apt 308		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Alexandria			VA	22303	Alexandria	VA	22303

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Venetia		Holland		Retired		
<b>Street Address</b>					<b>Street Address</b>		
526 Allegheny Ave					526 Allegheny Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Towson			MD	21204	Towson	MD	21204

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Jehovenn		Honculada		Allstate Insurance Co.		
<b>Street Address</b>					<b>Street Address</b>		
460 Indian Rd							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wayne			NJ	07470			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	A. Scott		Horak		R & J Construction Corp		
<b>Street Address</b>					<b>Street Address</b>		
4435 Austin Blvd					4435 Austin Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Island Park			NY	11558	Island Park	NY	11558

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Timothy	F	Horan		National Grid		
<b>Street Address</b>					<b>Street Address</b>		
94 Gold St					280 Melrose St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Shrewsbury			MA	01545	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Janet		Horowitz		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
7 South King St					7 South King St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Danbury			CT	06811	Danbury	CT	06811

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Keith	A.	Hovan		Southcoast Hospitals Group		
<b>Street Address</b>					<b>Street Address</b>		
316 Mary's Pond Road					101 Page Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rochester			MA	02770	New Bedford	MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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		
	Constance	A.	Howes		Women & Infants Hospital		
<b>Street Address</b>					<b>Street Address</b>		
253 Freeman Parkway					101 Dudley Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		14.29

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Mary Ann		Huckabay		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
12446 Fiori Lane					12446 Fiori Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sebastopol			CA	95472	Sebastopol	CA	95472

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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		
	Cynthia	R.	Huether		Eleanor Slater Hospital		
<b>Street Address</b>					<b>Street Address</b>		
717 Commonwealth Ave					111 Howard Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Patricia		Hughes		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10905 Stever St					10905 Stever St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Culver City			CA	90230	Culver City	CA	90230

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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		
	Peter	D.	Humphrey		North Atlantic Corp.		
<b>Street Address</b>					<b>Street Address</b>		
14B Nanaquaket					1255 Grand Army Hwy		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878-4718	Somerset	MA	02726-1203

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Andrew	S.	Hunt		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
95 Monroe Rd, Unit 2							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Quincy			MA	02169-1988			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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		
	Meta		Hunt		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2 Limerick Ln					2 Limerick Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Lake Hills			TX	78746	West Lake Hills	TX	78746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Yvonne		Hunter		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2744 Kenwood Ct					2744 Kenwood Ct		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Duluth			GA	30096	Duluth	GA	30096

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Ryan	E.	Hutchins		Gilbane Co		
<b>Street Address</b>					<b>Street Address</b>		
17 Colby Rd.					10 Channel Ctr St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wellesley			MA	02482	Boston	MA	02210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/04/2017		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			
	Ryan	E.	Hutchins		Gilbane Co			
<b>Street Address</b>					<b>Street Address</b>			
17 Colby Rd.					10 Channel Ctr St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wellesley					Boston		MA	02210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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			
	Andrea	M	Iannazzi		State of RI			
<b>Street Address</b>					<b>Street Address</b>			
1616 Gray Coach Lane					1 Dorance Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Brian	G	Iannuccillo		RP Iannuccillo & Sons Construction			
<b>Street Address</b>					<b>Street Address</b>			
85 Superior View Blvd.					25 Arline St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Brian	G	Iannuccillo		RP Iannuccillo & Sons Construction			
<b>Street Address</b>					<b>Street Address</b>			
85 Superior View Blvd.					25 Arline St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Bruce	R.	Iannuccillo		R.P. Iannuccillo & Sons Construction			
<b>Street Address</b>					<b>Street Address</b>			
93 Williams Rd					70 Calverly St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Maria	E.	Iannuccillo		Banfield Pet Hospital		
<b>Street Address</b>					<b>Street Address</b>		
1455 River St, Apt 2R					250 Grossman Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hyde Park			MA	02136-1600	Braintree	MA	02184

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Raymond		Iannuccillo		Women & Infants Hospital		
<b>Street Address</b>					<b>Street Address</b>		
169 Pawtuxet Terrace					100 Dudley St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Warwick			RI	02893	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		14.29

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Gayle		Ibarra		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
4211 Park Ave					4211 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Nashville			TN	37209	Nashville	TN	37209

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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		
	Judith	R.	Iliff		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7305 Maplecrest Rd, Unit 207					7305 Maplecrest Rd, Unit 207		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Elkridge			MD	21075	Elkridge	MD	21075

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Jean	F.	Imamoto		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1624 Kanuny St, Apt 505					1624 Kanuny St, Apt 505		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Honolulu			HI	96814	Honolulu	HI	96814

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Laura	T.	Iraci		NASA			
<b>Street Address</b>					<b>Street Address</b>			
161 Ada Ave					Ames Research Center			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mountain View					Moffett Field		CA	94035-0001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Israelite		Retired			
<b>Street Address</b>					<b>Street Address</b>			
9 Juniper Ave					9 Juniper Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Westerly		RI	02891-3616

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		Israelite		Retired			
<b>Street Address</b>					<b>Street Address</b>			
9 Juniper Ave					9 Juniper Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Westerly		RI	02891-3616

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Peter	A.	Jacavone		Barrett & Co.			
<b>Street Address</b>					<b>Street Address</b>			
4 Macera Farm Rd					42 Weybosset St, #2			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		7.15

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Karen		Jackson		Kaiser Permanente			
<b>Street Address</b>					<b>Street Address</b>			
10701 Lakeside Ave NE					125 16th Ave. E.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seattle					Seattle		WA	98112



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/12/2017		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			
	Douglas	L.	Jacobs		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1141 N. Main Rd					1141 N. Main Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jamestown					Jamestown		RI	02835-2217

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Ann		Jacquez		Dominion Energy			
<b>Street Address</b>					<b>Street Address</b>			
721 Smith St					40 Point St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Jared		Jamesson		MetLife			
<b>Street Address</b>					<b>Street Address</b>			
442 W. 57th St , 9A					200 Park Ave, 12th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10166

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Cynthia	M.	Jimenez		Retired			
<b>Street Address</b>					<b>Street Address</b>			
932 Franklin Street					932 Franklin Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wyomissing					Wyomissing		PA	19610

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		Joerger		Retired			
<b>Street Address</b>					<b>Street Address</b>			
99 Francisco Ave					99 Francisco Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rutherford					Rutherford		NJ	07070

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	Andrew		Johnson		State of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
400 Narragansett Pkwy					82 Smith Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Ann		Johnson		Ab Initio Software			
<b>Street Address</b>					<b>Street Address</b>			
10 Longfellow Rd					201 Spring St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Winchester					Lexington		MA	02421-8055

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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	A.	Johnson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
246 Peck Ave					246 Peck Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Haven					West Haven		CT	06516

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Heather		Johnson		Deutsche Bank			
<b>Street Address</b>					<b>Street Address</b>			
3150 South St NW					801 17th St NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/06/2017		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			
	Jennifer		Johnson		City Year			
<b>Street Address</b>					<b>Street Address</b>			
27 Shamrock Dr					275 Westminster St, Suite 500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		Johnson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1265 NW Heather Drive					1265 NW Heather Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Corvallis			OR	97330	Corvallis	OR	97330

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		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		
	Anne		Johnston		Retired		
<b>Street Address</b>					<b>Street Address</b>		
35 Parkview Ave					35 Parkview Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bronxville			NY	10708	Bronxville	NY	10708

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		Joiner		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5538 Lincrest Ln					5538 Lincrest Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Houston			TX	77056	Houston	TX	77056

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Beverly		Jones		Retired		
<b>Street Address</b>					<b>Street Address</b>		
600 S. Dixie Hwy					600 S. Dixie Hwy		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Palm Beach			FL	33401	West Palm Beach	FL	33401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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		
	Kenneth		Jones		Ken Jones Construction		
<b>Street Address</b>					<b>Street Address</b>		
50 Harry L Andrews Rd					50 Harry L Andrews Rd		
<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	04/03/2017		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		
	Susan		Jones		Retired		
<b>Street Address</b>					<b>Street Address</b>		
712 Mockingbird Lane					712 Mockingbird Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Plantation			FL	33324	Plantation	FL	33324

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Maureen		Jorde		Pawtucket Hot Mix Asphalt		
<b>Street Address</b>					<b>Street Address</b>		
526 Old Post Rd					25 Concord St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
No. Attleboro			MA	02760-4227	Pawtucket	RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		
	Dorothy	S.	Joslin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
11110 Del Rio Dr					11110 Del Rio Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fairfax			VA	22030	Fairfax	VA	22030

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Karim		Jouki		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
83 Keystone Dr							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Leominster			MA	01453			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Simone		Joyaux		Joyaux Associates		
<b>Street Address</b>					<b>Street Address</b>		
10 Johnson Road					10 Johnson Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Foster			Ri	02825	Foster	Ri	02825

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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			
	Jeffrey		Joyce		Retired			
<b>Street Address</b>					<b>Street Address</b>			
6515 Avenue T					6515 Avenue T			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					Brooklyn		NY	11234

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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			
	James	A.	Kadamus		Sightlines			
<b>Street Address</b>					<b>Street Address</b>			
1 Dennis Court					405 Church St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Guilford		CT	06437-2003

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Rick		Kadunc		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2637 W. Aleuts Dr					2637 W. Aleuts Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Beverly Hills					Beverly Hills		FL	34465

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/24/2017		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			
	Rebecca	E.	Kaegi		Pritzker College Prep			
<b>Street Address</b>					<b>Street Address</b>			
403 N. Elmwood Ave					4131 W. Cortland			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Oak Park					Chicago		IL	60639

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/21/2017		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			
	Ravindra		Kandula		Retired			
<b>Street Address</b>					<b>Street Address</b>			
23850 Via Italia Cir, Apt 1106					23850 Via Italia Cir, Apt 1106			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bonita Springs					Bonita Springs		FL	34134

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Alyssa	A.	Karam		First Bristol Corp		
<b>Street Address</b>					<b>Street Address</b>		
35 Nanaquaket Point Rd					10 N. Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878	Fall River	MA	02720-2130

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/21/2017		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		
	Francesca	G.	Karam		Karam Financial Group		
<b>Street Address</b>					<b>Street Address</b>		
645 Madison St					456 Rock St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fall River			MA	02720	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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	J	Karam		First Bristol Corp.		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 2516					10 N Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fall River			MA	02722-2516	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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	M	Karam		First Bristol Corporation		
<b>Street Address</b>					<b>Street Address</b>		
119 Meadowbrook Lane					10 N Main St # 4A		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Westport			MA	02790	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Janis	B	Karam		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
35 Nanaquaket Rd					35 Nanaquaket Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878-4717	Tiverton	RI	02878-4717

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Jeffrey	T.	Karam		Karam Financial Group			
<b>Street Address</b>					<b>Street Address</b>			
37 Dudley St.					456 Rock Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fall River					Fall River		MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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	S.	Karam		Karam Financial Group			
<b>Street Address</b>					<b>Street Address</b>			
456 Rock Street					456 Rock Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fall River					Fall River		MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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			
	Stephanie	A.	Karam		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
119 Meadowbrook Ln								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport								

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	JULIE	D.	Karcis		United Health			
<b>Street Address</b>					<b>Street Address</b>			
7731 E. Maripose Dr					1 East Washington St, Suite 1700			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scottsdale					Phoenix		AZ	85004

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/03/2017		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			
	Alison		Katz		A.T. Cross Company			
<b>Street Address</b>					<b>Street Address</b>			
35 Eames St					299 Promenade St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Mory	N.	Katz		Pro Global Insurance Solutions			
<b>Street Address</b>					<b>Street Address</b>			
11 Elide Rd					521 Fifth Ave, Suite 630			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Katonah					New York		NY	10175

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Katherine		Kazarian		State of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
380 Pleasant St					82 Smith Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rumford					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Michele	H.	Kazarian		Retired			
<b>Street Address</b>					<b>Street Address</b>			
380 Pleasant Street					380 Pleasant Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rumford					Rumford		RI	02916

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/11/2017		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			
	Jurate		Kazickas		Evercore Partners			
<b>Street Address</b>					<b>Street Address</b>			
55 E. 52nd St					55 E. 52nd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10055-0110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/14/2017		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			
	Dennis		Keefe		Care New England			
<b>Street Address</b>					<b>Street Address</b>			
3 Shea Ln					45 Willard Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Foxborough					Providence		RI	02905-3218



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/08/2017		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			
	Karen	J.	Keefer		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1720 Valota Rd					1720 Valota Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Redwood City					Redwood City		CA	94061

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Jonathan		Keidan		Keidan Management, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
7 Great Jones St					750 3rd Ave, 6th Fl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Marilyn	G.	Kelley		University of Oklahoma			
<b>Street Address</b>					<b>Street Address</b>			
2608 Butler Dr					660 Parrington Oval			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Norman					Norman		OK	73019-0390

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Susan		Kelly		Fenix Real Estate			
<b>Street Address</b>					<b>Street Address</b>			
17 Wingate Road					897 Smithfield Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Susan		Kelly		Fenix Real Estate			
<b>Street Address</b>					<b>Street Address</b>			
17 Wingate Road					897 Smithfield Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Susan		Kelly		Fenix Real Estate		
<b>Street Address</b>					<b>Street Address</b>		
17 Wingate Road					897 Smithfield Ave		
<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	05/04/2017		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		
	Susan		Kelly		Fenix Real Estate		
<b>Street Address</b>					<b>Street Address</b>		
17 Wingate Road					897 Smithfield Ave		
<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	06/04/2017		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		
	Susan		Kelly		Fenix Real Estate		
<b>Street Address</b>					<b>Street Address</b>		
17 Wingate Road					897 Smithfield Ave		
<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	06/04/2017		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		
	Susan		Kelly		Fenix Real Estate		
<b>Street Address</b>					<b>Street Address</b>		
17 Wingate Road					897 Smithfield Ave		
<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	06/16/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Kempner		MWW Public Relations		
<b>Street Address</b>					<b>Street Address</b>		
378 E. Madison Ave					304 Park Avenue South		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cresskill			NJ	07626-1742	New York	NY	10010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/19/2017		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			
	Zachary		Kempner		Berk Communications			
<b>Street Address</b>					<b>Street Address</b>			
200 W. 67th St					304 Park Avenue South			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Diana		Kennedy		Self-Employed Educational Therapist			
<b>Street Address</b>					<b>Street Address</b>			
128 Calumet Ave					128 Calumet Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Anselmo					San Anselmo		CA	94960

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/08/2017		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			
	Catherine		Key		Retired			
<b>Street Address</b>					<b>Street Address</b>			
7322 N. County Rd, #1850E					7322 N. County Rd, #1850E			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charleston					Charleston		IL	61920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Mehdi		Khosrovani		NEMD Architects			
<b>Street Address</b>					<b>Street Address</b>			
19 Massasoit Dr					1 Virginia Ave #202			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seekonk					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Brandon		Kidd		Pirate Cove Marina			
<b>Street Address</b>					<b>Street Address</b>			
739 Wapping Road					109 Point Row			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portsmouth					Portsmouth		RI	02871

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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	S.	Kilby		Retired			
<b>Street Address</b>					<b>Street Address</b>			
9208 Rose Anne Pl					9208 Rose Anne Pl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Gaithersburg					Gaithersburg		MD	20877

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	J. Scott		Kilpatrick		Chisholm Chisholm & Kilpatrick, LLP			
<b>Street Address</b>					<b>Street Address</b>			
309 Benefit St					1 Turks Head Place, Ste 1100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-2205

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	Charlotte	W.	King		Retired			
<b>Street Address</b>					<b>Street Address</b>			
405 Plumbridge St, Unit 202					405 Plumbridge St, Unit 202			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lutherville					Lutherville		MD	21093

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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			
	Christine	M.	King		BETA Group, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
2 Berkeley Dr					6 Blackstone Valley Pl, #101			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Franklin					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/09/2017		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	A	King		GTech Corp			
<b>Street Address</b>					<b>Street Address</b>			
705 Talon Place					1011 W. Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Louisville					Louisville		KY	40202-2623

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	John		Kirkman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3307 English Circle					3307 English Circle		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sanford			NC	27332	Sanford	NC	27332

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/26/2017		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		
	Scott		Kirkpatrick		Hebrew University of Jerusalem		
<b>Street Address</b>					<b>Street Address</b>		
1321 Upland Dr, #2936					Edmond Safra Campus		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Houston			TX	77043	Jerusalem		91904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Joan	E.	Kirsner		Retired		
<b>Street Address</b>					<b>Street Address</b>		
6 Escalon Dr					6 Escalon Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mill Valley			CA	94941	Mill Valley	CA	94941

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Frances		Kitterman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
696 N. Market St, Apt 321					696 N. Market St, Apt 321		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brenham			TX	77833	Brenham	TX	77833

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Nancy	K.	Kleckner		Harvard University		
<b>Street Address</b>					<b>Street Address</b>		
35 Bennington St					Cambridge		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newton			MA	02458	Cambridge	MA	02138

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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			
	Joel		Klein		Oscar Health Insurance			
<b>Street Address</b>					<b>Street Address</b>			
565 Park Ave, Apt 12W					295 Lafayette St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
New York			NY	10065-7322	New York	NY	10012	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		1.00

**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.	Klein		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2975 SE 36th St					2975 SE 36th St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Ocala			FL	34471	Ocala	FL	34471	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Daniel	E.	Kleinman		Hinckley Allen & Snyder			
<b>Street Address</b>					<b>Street Address</b>			
6 Dogwood Lane					20 Church Street			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Farmington			CT	06032	Hartford	CT	06103	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Glenda		Kline		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
11811 Far Edge Path					11811 Far Edge Path			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Columbia			MD	21044	Columbia	MD	21044	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Margaret		Klopfert		County of San Luis Obispo			
<b>Street Address</b>					<b>Street Address</b>			
621 Eman Court					1055 Monterey St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Arroyo Grande			CA	93420	San Luis Obispo	CA	93408	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Martha	B.	Knisley		Self-Employed Health Care Consultant		
<b>Street Address</b>					<b>Street Address</b>		
2206 Alexander Rd					2206 Alexander Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Raleigh			NC	27608	Raleigh	NC	27608

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Katharine		Kohm		Pierce Atwood LLP		
<b>Street Address</b>					<b>Street Address</b>		
295 Norwood Ave					72 Pine Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02905-2711	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Sandra		Koller		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
12235 West 61st Ave					12235 West 61st Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Arvada			CO	80004	Arvada	CO	80004

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/15/2017		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		
	Andrew		Koluch		US Army		
<b>Street Address</b>					<b>Street Address</b>		
160 Kingfisher Ct					1500 Defense Pentagon		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lafayette			IN	47909-8070	Washington	DC	20310

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Isobel	R.	Konecky		Retred		
<b>Street Address</b>					<b>Street Address</b>		
248 E. 6th St					248 E. 6th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10065	New York	NY	10065

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/03/2017		5,400.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Willem		Kooyker		Blenheim Capital Management LLC			
<b>Street Address</b>					<b>Street Address</b>			
112 East 78th St					300 Connell Dr, Suite 5200			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					Berkeley Heights		NJ	07922

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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			
	Marilyn	J.	Kopp		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3 Hilaire Dr					3 Hilaire Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Huntington					Huntington		NY	11743

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/20/2017		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			
	Therese		Kornbluh		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
401 Ridge Rd					401 Ridge Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Schodack Landing					Schodack Landing		NY	12156

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		Kraft		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
235 Burnside Pl					235 Burnside Pl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Ridgewood					Ridgewood		NJ	07450-1701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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			
	Mary		Kraft		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3018 Butler Glen Dr					3018 Butler Glen Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chapel Hill					Chapel Hill		NC	27516



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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		
	Arthur		Kramer		Affordable Housing Strategies		
<b>Street Address</b>					<b>Street Address</b>		
4 Cathedral Sq					4 Cathedral Square		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903-3636	Providence	RI	02903-3636

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/18/2017		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		
	Ellen	R.	Kritzman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10710 SW Cowan Rd					10710 SW Cowan Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Vashon			WA	98070	Vashon	WA	98070

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Herbert	A.	Krueger		Krueger's Waterproofing Co., Inc.		
<b>Street Address</b>					<b>Street Address</b>		
2782 Diamond Hill Rd					2782 Diamond 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
	Credit/Debit Card	Individual	05/23/2017		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		
	Tracy		Kubricky		Southcoast Hospital Group		
<b>Street Address</b>					<b>Street Address</b>		
9 Crest Drive					101 Page Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	New Bedford	MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/08/2017		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		
	Victoria		Kupetz		Retired		
<b>Street Address</b>					<b>Street Address</b>		
24700 Long Valley Rd					24700 Long Valley Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hidden Hills			CA	91302	Hidden Hills	CA	91302

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	A.	Kuzneski	Jr.	Hinckley Allen			
<b>Street Address</b>					<b>Street Address</b>			
188 Misty Meadow Ln					100 Westminster Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Richard	L.	LaFrance		LaFrance Hospitality Co.			
<b>Street Address</b>					<b>Street Address</b>			
31 Fallon Dr					66 State St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport					Westport		MA	02790

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Laginestra		CBRE, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
9 Old County Ct					200 Park Ave, Fl 22			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Demarest					New York		NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		Lally		BeneSys Administrators			
<b>Street Address</b>					<b>Street Address</b>			
8 Martin Ave					750 Dorchester Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bristol					Boston		MA	02125-1132

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Ruth		Lambert		Retired			
<b>Street Address</b>					<b>Street Address</b>			
100 York St					100 York St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New Haven					New Haven		CT	06511

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Alfred		Landsberg		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10 Sunlight Springs Rd					10 Sunlight Springs Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lakewood			NJ	08701	Lakewood	NJ	08701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Scott		Langley		RESH, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
182 Spring Water Dr					25 Kenwood Circle		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Woonsocket			RI	02895-4967	Franklin	MA	02038

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/22/2017		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		
	Marie	J	Langlois		Retired		
<b>Street Address</b>					<b>Street Address</b>		
254 Wayland Ave					254 Wayland Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Susan	A.	Lasalle		Women and Infants Hospital		
<b>Street Address</b>					<b>Street Address</b>		
62 Halleck Ave.					101 Dudley Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverside			RI	02915	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Karen	D.	Latona		H.Carr & Sons		
<b>Street Address</b>					<b>Street Address</b>		
191 Forge Rd					100 Royal Little Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852-1007	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	George		LaTour		Retired			
<b>Street Address</b>					<b>Street Address</b>			
11 Ragnell Road					11 Ragnell Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Greenwich					West Greenwich		RI	02817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Sandra	M.	Laurie		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
18 Water St								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence							RI	02911

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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			
	Charles		Lauter		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3092 Gibraltar Rd					3092 Gibraltar Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fish Creek					Fish Creek		WI	54212

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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			
	Marceline		Lazzari		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4932 N. Lexington St					4932 N. Lexington St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tacoma					Tacoma		WA	98407

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		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		Learnard		Learnard Consulting, LLC			
<b>Street Address</b>					<b>Street Address</b>			
109 Loblolly Cir					109 Loblolly Cir			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Peactree City					Peactree City		GA	30269-2034

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Geraldine		Leddy		Retired		
<b>Street Address</b>					<b>Street Address</b>		
40 Ring Farm West Rd.					40 Ring Farm West Rd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bridgton			ME	04009	Bridgton	ME	04009

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Debra		Leff		Education Service Center Region 13		
<b>Street Address</b>					<b>Street Address</b>		
4110 Sinclair Ave					5701 Springdale Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Austin			TX	78756	Austin	TX	78723

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Joann		Leimberg		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2 Red Cedar Rd					2 Red Cedar Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fernandina Beach			FL	32034	Fernandina Beach	FL	32034

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Anthony	R.	Leone		Leone Law		
<b>Street Address</b>					<b>Street Address</b>		
9 Westland Court					1345 Jefferson Boulevard		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Warwick	Ri	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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	J.	Lepore		Coia & Lepore		
<b>Street Address</b>					<b>Street Address</b>		
226 South Main Street					226 South Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Jarad		Lepore		Local Laborers Union 1033			
<b>Street Address</b>					<b>Street Address</b>			
410 S. Main St					410 S. Main St, Q#3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-7124

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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			
	Sheri		Lepore		Coia & Lepore			
<b>Street Address</b>					<b>Street Address</b>			
226 South Main Street					226 S Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Renee		Lerner		Renee Lerner, Self Employed Artist			
<b>Street Address</b>					<b>Street Address</b>			
101 West End Avenue, Apt 26E					101 West End Avenue, Apt 26E			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10023

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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			
	Michael		Leshinsky		Leshinsky Finance LLC			
<b>Street Address</b>					<b>Street Address</b>			
164 9th St					164 9th 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	04/03/2017		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			
	Ellen	Q.	Levine		Retired			
<b>Street Address</b>					<b>Street Address</b>			
739 Finnbar Dr					739 Finnbar Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cary					Cary		NC	27519

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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		
	Daniel	W.	Levy		McKool Smith P.C.		
<b>Street Address</b>					<b>Street Address</b>		
173 Riverside Drive					1 St. Andrews Plaza		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York		NY		10024-1615	New York	NY	10007-1701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Sarah		KirshbaLevy		Viacom/McKool Smith		
<b>Street Address</b>					<b>Street Address</b>		
173 Riverside Dr, Apt 12B					1515 Broadway		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York		NY		10024-1615	New York	NY	10036

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Joel		Lewin		Hinckley,Allen & Snyder		
<b>Street Address</b>					<b>Street Address</b>		
28 State St					28 State St		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boston		MA		02109	Boston	MA	02109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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		
	Mara		Lewis		RVA		
<b>Street Address</b>					<b>Street Address</b>		
5701 Camino el Sol					4030 Gulf of Mexico Drive		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boca Raton		FL		33433	Longboat Key	FL	34228

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		
	Gerry		Lian		Invesco		
<b>Street Address</b>					<b>Street Address</b>		
2717 Carol Rd					1555 Peachtree Street, N.E., Suite 1800		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Union		NJ		07083-4803	Atlanta	GA	30309

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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		
	Gerry		Lian		Invesco		
<b>Street Address</b>					<b>Street Address</b>		
2717 Carol Rd					1555 Peachtree Street, N.E., Suite 1800		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Union			NJ	07083-4803	Atlanta	GA	30309

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Gerry		Lian		Invesco		
<b>Street Address</b>					<b>Street Address</b>		
2717 Carol Rd					1555 Peachtree Street, N.E., Suite 1800		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Union			NJ	07083-4803	Atlanta	GA	30309

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Arlene		Lieb		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1440 N. Lake Shore Dr					1440 N. Lake Shore Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60610	Chicago	IL	60610

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Leslie		Lihou		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2436 Edgewater Dr, Apt 46					2436 Edgewater Dr, Apt 46		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Santa Rosa			CA	95407	Santa Rosa	CA	95407

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		20.40

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Eileen		Lindburg		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
1205 Foster St							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
South Bend			IN	46617			



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/14/2017		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	G.	Lindsley		National Institute for Occupational Safety & Health		
<b>Street Address</b>					<b>Street Address</b>		
831 Alpine St, Apt 3					1095 Willowdale Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Morgantown			WV	26505	Morgantown	WV	26505

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Michelle		Lindstrom		Immigrants Are America LLC		
<b>Street Address</b>					<b>Street Address</b>		
6217 Mazwood Rd					3 Bethesda Metro Center, Cuite 700		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rockville			MD	20852	Bethesda	MD	20814

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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		
	Lisa	R.	Lipman		Roetzel & Andress		
<b>Street Address</b>					<b>Street Address</b>		
850 Park Shore Dr					850 Park Shore Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Naples			FL	34103	Naples	FL	34103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		
	Christopher		Little		Pierce Atwood LLP		
<b>Street Address</b>					<b>Street Address</b>		
125 Fresh Meadow Road					72 Pine St #5		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879-1642	Providence	RI	02903-2846

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Michelle	B.	Little		Retired Educator		
<b>Street Address</b>					<b>Street Address</b>		
125 Fresh Meadow Rd					125 Fresh Meadow Rd		
<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
	Credit/Debit Card	Individual	06/26/2017		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			
	William		Little		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1107 5th Ave					1107 5th Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10128-0145

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David		Livingston		EdenRoc Sciences, LLC			
<b>Street Address</b>					<b>Street Address</b>			
52 Jennys Ln					99 Erie St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Cambridge		MA	02139

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Frank		Lombardi		Frank Lombardi, Esq.			
<b>Street Address</b>					<b>Street Address</b>			
25 Briarbrooke Lane					25 Briarbrooke Lane			
<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	05/18/2017		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			
	Gail		Long		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
325 E. 72nd St					325 E. 72nd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10021

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Sally		Long		Retired			
<b>Street Address</b>					<b>Street Address</b>			
685 Linden Dr					685 Linden Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Englewood					Englewood		FL	34223

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Phyllis		Loobey		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1593 Jefferson St					1593 Jefferson St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Eugene			OR	97402	Eugene	OR	97402

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Leanna	D.	Loomer		Retired		
<b>Street Address</b>					<b>Street Address</b>		
28 Hartford Ave					28 Hartford Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newington			CT	06111	Newington	CT	06111

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		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		
	Gilbert		Lopes		The Lopes Companies, LLC.		
<b>Street Address</b>					<b>Street Address</b>		
821 Oak St					490 Winthrop Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Dighton			MA	02764	Taunton	MA	02780

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Wendy	M.	Loren		Lane Community College		
<b>Street Address</b>					<b>Street Address</b>		
4890 Whiteaker St					4000 E. 30th Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Eugene			OR	97405	Eugene	OR	97405

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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		
	David	I.	Lough		Hinckley Allen & Snyder, LLP		
<b>Street Address</b>					<b>Street Address</b>		
96 Long Highway					100 Westminster St, Suite 1500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Little Compton			RI	02837	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/13/2017		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		
	Pamela		Lowry		Retired		
<b>Street Address</b>					<b>Street Address</b>		
27 Oak Road					27 Oak Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Santa Cruz			CA	95060	Santa Cruz	CA	95060

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Erika		Luikart		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
350 Washburn Dr					350 Washburn Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fremont			CA	94536	Fremont	CA	94536

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Angela	B.	Lunking		Action Test Prep and Tutorery		
<b>Street Address</b>					<b>Street Address</b>		
6924 Summerhill Ridge Dr					6924 Summerhill Ridge Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Charlotte			NC	28226	Charlotte	NC	28226

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Frances	M.	Lunney		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5902 Mount Eagle Dr, Apt 316					5902 Mount Eagle Dr, Apt 316		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Alexandria			VA	22303	Alexandria	VA	22303

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		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		
	Elinore		Lurie		Retired		
<b>Street Address</b>					<b>Street Address</b>		
21 21st Avenue					21 21st Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94121	San Francisco	CA	94121

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Armand	T	Lusi		A.F Lusi Contruction			
<b>Street Address</b>					<b>Street Address</b>			
120 Spencer Ave					39 Cedar Swamp Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Smithfield		RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	C.	Lynch		J.H. Lynch & Sons, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
50 Lynch Pl					50 Lynch Pl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Cumberland		RI	02864-5334

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/18/2017		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			
	Diane		Lynch		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1400 South Road					1400 South Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					East Greenwich		RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		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			
	James	F	Lynch		Thermo Capital Partners LLC			
<b>Street Address</b>					<b>Street Address</b>			
1400 South Rd					1735 19th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Denver		CO	80202-6002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patrick		Lynch		Patrick Lynch Group			
<b>Street Address</b>					<b>Street Address</b>			
One Park Row					One Park Row			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	William	J	Lynch		Lynch & Pine			
<b>Street Address</b>					<b>Street Address</b>			
35 Pequot Rd					One Park Row, 5th Fl			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Pawtucket					Providence		RI 02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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			
	Annette	T.	MacAdams		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
63 Hermaine Dr					63 Hermaine Dr			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
North Attleboro					North Attleboro		MA 02760-4436	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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			
	Richard	W.	MacAdams		MacAdams & Wieck			
<b>Street Address</b>					<b>Street Address</b>			
63 Germaine Dr					101 Dyer St, Ste 400			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
North Attleboro					Providence		RI 02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/02/2017		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			
	Bruce		Macaffer		WPP Group USA, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
500 W. 43rd St					100 Park Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
New York					New York		NY 10017-5529	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Stephen		MacGillivray		Pierce Atwood, LLP			
<b>Street Address</b>					<b>Street Address</b>			
230 Third Beach Road					72 Pine St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Middletown					Providence		RI 02903	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Ann		MacLaughlin		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1970 Mesa Rd					1970 Mesa Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Colorado Springs					Colorado Springs		CO	80904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/31/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	William	Q.	MacLean	Jr.	Sylvia Group of Insurance Agencies			
<b>Street Address</b>					<b>Street Address</b>			
349 Dana Farms					PO Box 230			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fairhaven					Fairhaven		MA	02719

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Ingeborg		Maggiacomo		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
39 Greening Ln					39 Greening Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920-4609

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Edward	L.	Maggiacomo	Sr.	Retired			
<b>Street Address</b>					<b>Street Address</b>			
39 Greening Lane					39 Greening Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02920-4609

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/26/2017		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			
	Joel		Magid		Retired			
<b>Street Address</b>					<b>Street Address</b>			
65 Hutchinson Blvd					65 Hutchinson Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scarsdale					Scarsdale		NY	10583

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Debra	L.	Magnuson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7930 Newberry Ct N					7930 Newberry Ct N		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Stillwater			MN	55082	Stillwater	MN	55082

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/15/2017		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		
	Brooks	R.	Magratten		Pierce Atwood LLP		
<b>Street Address</b>					<b>Street Address</b>		
75 Lorraine Avenue					72 Pine St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/16/2017		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	P.	Maher		CBRE		
<b>Street Address</b>					<b>Street Address</b>		
322 E. 30th St					200 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10016-8303	New York	NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Katherine		Austin Mahle		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1410 Spring Valley Rd					1410 Spring Valley Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Golden Valley			MN	55422	Golden Valley	MN	55422

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/27/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Mahoney		Boston Scientific		
<b>Street Address</b>					<b>Street Address</b>		
324 Rumstick Rd					1 Boston Scientific Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Natick	MA	01760-1536



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Robin		Main		Hinckley Allen & Snyder, LLP		
<b>Street Address</b>					<b>Street Address</b>		
30 Westwind Dr					100 Westminster St, Suite 1500		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Jamestown		RI		02835	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Winfield		Major		Honeywell Safety Products		
<b>Street Address</b>					<b>Street Address</b>		
200 Elmgrove Avenue					900 Douglas Pike		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence		RI		02906	Smithfield	RI	02917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Nancy		Makar		Nancy Makar, LICSW		
<b>Street Address</b>					<b>Street Address</b>		
1231 Etta Ave					3261 Commercial Way		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Spring Hill		FL		34609	Spring Hill	FL	34609

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/26/2017		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		
	Louise		Malakoff		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
142 Yorkshire Dr					142 Yorkshire Dr		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pittsburgh		PA		15208	Pittsburgh	PA	15208

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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	A.	Manafort	Jr.	Manafort Brothers, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 99					PO Box 99		
<b>City</b>		<b>State</b>		<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Plainville		CT		06062-0099	Plainville	CT	06062-0099

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Ann		Mancini		Retired		
<b>Street Address</b>					<b>Street Address</b>		
563 Natick Ave					563 Natick Avenue		
<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
	Check	Individual	05/11/2017		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		
	Gregory		Mancini		BuildRI		
<b>Street Address</b>					<b>Street Address</b>		
61 Main Street					One Richmond Square, #134C		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852-5017	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Kenneth	J.	Mancini		Rhode Island Distributing		
<b>Street Address</b>					<b>Street Address</b>		
119 Hopkins Hill Road					119 Hopkins Hill Rd		
<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
	Credit/Debit Card	Individual	05/17/2017		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		Mancini		RISCPA		
<b>Street Address</b>					<b>Street Address</b>		
34 Peveril Rd					45 Royal Little Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-2422	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Raymond		ThomasMancini	Jr.	RI Distributing Co., LLC		
<b>Street Address</b>					<b>Street Address</b>		
55 Raven Circle					119 Hopkins Hill Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-3557	West Greenwich	RI	02817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Raymond	T.	Mancini	Sr	RI Distributing		
<b>Street Address</b>					<b>Street Address</b>		
563 Natick Rd					119 Hopkins Hill Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	West Greenwich	RI	02817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/02/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Deborah		Mancini-Morrocco		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
61 Kimberly Ln							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-2625			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/20/2017		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		
	Benjamin		Mandell		Tricera Capital		
<b>Street Address</b>					<b>Street Address</b>		
111 Brickell Bay Dr					600 Brickell ve, #1623		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Miami			FL	33131-2954	Miami	FL	33131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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		
	Mark	S.	Mandell		Mandell, Schwartz & Boisclair		
<b>Street Address</b>					<b>Street Address</b>		
1 Park Row					One Park Row		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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		
	Zachary		Mandell		Mandell, Schwartz, & Boisclair		
<b>Street Address</b>					<b>Street Address</b>		
75 Orchard Ave, Apt 3					1 Park Row		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906-5402	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Lynn	A.	Manning		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
71 Grays Point Road					71 Gray's Point Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					Charlestown		RI	02813

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Robert	J.	Manning		Gray's Point Investments, LLC			
<b>Street Address</b>					<b>Street Address</b>			
71 Gray's Point Road					71 Gray's Point Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					Charlestown		RI	02813

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jose	M.	Marcano		JM Painting & Plastering			
<b>Street Address</b>					<b>Street Address</b>			
20 Ruby Street					20 Ruby St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Matthew		Marcello		Hinckley Allen & Snyder, LLP			
<b>Street Address</b>					<b>Street Address</b>			
255 Promenade St., Apt 622					100 Westminster St, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Patricia		March		Retired			
<b>Street Address</b>					<b>Street Address</b>			
72 Frenchs Road					72 Frenchs Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woodstock					Woodstock		VT	05091

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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			
	Wendy		Marcus		Marcus Goer Interiors, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
33 Benefit St					33 Benefit St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02904-2743

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Peter	M	Marino		Neighborhood Health Plan			
<b>Street Address</b>					<b>Street Address</b>			
224 Catalpa Way					299 Promenade St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Coventry					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Arthur		Mark		Retired			
<b>Street Address</b>					<b>Street Address</b>			
48 Carriage Drive					48 Carriage Drive			
<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	05/10/2017		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			
	Vark		Markarian		Contempo Card Company			
<b>Street Address</b>					<b>Street Address</b>			
101 Glenridge Dr					69 Tingley Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/11/2017		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			
	Rick		Markello		Southcoast Physicians Group			
<b>Street Address</b>					<b>Street Address</b>			
10 Joe Rd					208 Mill Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Falmouth					Fairhaven		MA	02719

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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			
	Eugenia	S	Marks		Retired			
<b>Street Address</b>					<b>Street Address</b>			
11 Methyl St					11 Methyl St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02906-4901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas	S	Marrion		Hinckley,Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
38 Maple Valley Rd					20 Church St, #18			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bolton					Hartford		CT	06103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/02/2017		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			
	Leo		Marshall		JL Marshall & Sons, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 327					3 Clara Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport Point					Seekonk		MA	02771

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Lianne		Marshall		MC-EB Realty			
<b>Street Address</b>					<b>Street Address</b>			
244 Beacon St, Apt 4A					100 Boardman Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Boston		MA	02128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Patricia	P.	Marshall		J.L. Marshall & Sons LLC			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 327					3 Clara St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westport Point					Seekonk		MA	02771

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Thomas		Marshall		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3901 Montgomery Blvd., NE, #114					3901 Montgomery Blvd., NE, #114		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Albuquerque			NM	87109	Albuquerque	NM	87109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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	L	Marshall	III	Brown University		
<b>Street Address</b>					<b>Street Address</b>		
760 Elmgrove Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903	Providence	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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		
	Michael		Marston		Marston Associates, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
3375 Jackson St.					3463 State St, #536		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94118-2018	Santa Barbara	CA	93105-2662

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		90.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Marston		Marston Associates, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
3375 Jackson St.					3463 State St, #536		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94118-2018	Santa Barbara	CA	93105-2662

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Philip	R	Martelly		Martelly Construction Corp		
<b>Street Address</b>					<b>Street Address</b>		
P.O Box 497					51 Cummings Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Swansea			MA	02777	Swansea	MA	02777

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Geri		Martin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7425 Pelican Bay Blvd., Apt 906					7425 Pelican Bay Blvd., Apt 906		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Naples			FL	34108	Naples	FL	34108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/12/2017		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		
	Roberta		Martin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
14623 Bonaire Blvd., #407					14623 Bonaire Blvd., #407		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Delray Beach			FL	33446	Delray Beach	FL	33446

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Roberta		Martin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
14623 Bonaire Blvd., #407					14623 Bonaire Blvd., #407		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Delray Beach			FL	33446	Delray Beach	FL	33446

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Maria		M.H. Martinez		Retired		
<b>Street Address</b>					<b>Street Address</b>		
345 Andrews Ave					345 Andrews Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnson City			NY	13790	Johnson City	NY	13790

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Esther		Massimini		Honeywell		
<b>Street Address</b>					<b>Street Address</b>		
4150 E. Becker Ln					1944 E. Sky Harbor Circle N		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Phoenix			AZ	85028	Phoenix	AZ	85034



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Mastrangelo		San Mateo County			
<b>Street Address</b>					<b>Street Address</b>			
153 Myrtle St					555 County Center			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Redwood City					Redwood City		CA	94063

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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			
	Brian	T	Mastroberti		Velis Associates			
<b>Street Address</b>					<b>Street Address</b>			
2 Bouton Rd					151 S 14th S			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lloyd Harbor					Lindenhurst		NY	11757

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		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			
	Richard		Mateus		Prima Care, P.C.			
<b>Street Address</b>					<b>Street Address</b>			
109 Angus St					109 Angus St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Somerset					Somerset		MA	02725-1606

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		14.29

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Janet		Mather		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
4 Caryl Lane					4 Caryl Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Philadelphia					Philadelphia		PA	19118

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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			
	Lawrence		Matika		Retired			
<b>Street Address</b>					<b>Street Address</b>			
35 Adams Point Road					35 Adams Point Road			
<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
	Credit/Debit Card	Individual	04/10/2017		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		
	Carol		Matre		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
24700 Voorhees Dr					24700 Voorhees Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Los Altos Hills			CA	94022	Los Altos Hills	CA	94022

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Gretchen	E.	Maurer		Property Advisory Group		
<b>Street Address</b>					<b>Street Address</b>		
4 April Ct					4 Cathedral Square		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02908-2111	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Mary		Mayer		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1417 Dicken Dr					1417 Dicken Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Ann Arbor			MI	48103	Ann Arbor	MI	48103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/25/2017		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		
	Heather		Mayo		Sweet Peas Village		
<b>Street Address</b>					<b>Street Address</b>		
237 Walmsley Lane					836 Middle Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saunderstown			RI	02874	East Greenwich	RI	02874

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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		
	Barbara	S.	Mazzaferro		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
59 Nanaquaket Rd					59 Nanaquaket Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tiverton			RI	02878	Tiverton	RI	02878

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/25/2017		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			
	Richard		McAuliffe		Mayforth Group			
<b>Street Address</b>					<b>Street Address</b>			
80 Fox Run					408 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Michael	J.	McCaffrey		State of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
115 Twin Oak Drive					82 Smith Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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			
	Shelagh	R.	McCahey		Simone and McCahey, LLP			
<b>Street Address</b>					<b>Street Address</b>			
21 Dartmouth Ave					128 Dorrance St Suite 530			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Sarah	M.	McCarty		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
776 Carrera Ln					776 Carrera Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lake Oswego					Lake Oswego		OR	97034

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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			
	Eugenia		McCleary		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
296 Sellersville Road					296 Sellersville Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chalfont					Chalfont		PA	18914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Kathleen		McClelland		Self-Employed Marriage & Family Therapist			
<b>Street Address</b>					<b>Street Address</b>			
1930 12th Ave					2540 Charleston St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Oakland			CA	94606	Oakland	CA	94602	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Joan		McConkey		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4860 Sioux Dr					4860 Sioux Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Boulder			CO	80303	Boulder	CO	80303	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Rose		McCormick		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
851 E. Galena Dr					851 E. Galena Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Sandy			UT	94094	Sandy	UT	94094	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/06/2017		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			
	Charles		McCoy		Nephrology Association			
<b>Street Address</b>					<b>Street Address</b>			
5 Oyster Shell Ln					1510 H Street, NW			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Barrington			RI	02806	Washington	DC	20008	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/06/2017		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			
	Lory Snady		McCoy		RI Eye Institute			
<b>Street Address</b>					<b>Street Address</b>			
5 Oyster Shell Ln					150 E Manning St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	
Barrington			RI	02806	Providence	RI	02906	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		McDole		National Lumbar Co.			
<b>Street Address</b>					<b>Street Address</b>			
34 Cliff Dr					71 Maple St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Mansfield		MA	02048

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/13/2017		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			
	Edward		McElroy		American Federation of Teachers			
<b>Street Address</b>					<b>Street Address</b>			
3001 Veazey Terrace NW					555 New Jersey Ave NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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			
	Edward	F.	McGarry		Softub Inc.			
<b>Street Address</b>					<b>Street Address</b>			
78 Carolina Cherry Drive					305 Nash Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Las Vegas					New Bedford		MA	02746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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			
	Stephen	J.	McGarry		Paramount Restaurant Supply			
<b>Street Address</b>					<b>Street Address</b>			
4544 E. Avenida Corazon de Oro					4645 W. McDowell Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Gold Canyon					Phoenix		AZ	85035

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Gerald	J.	McGraw	Jr.	J&J Electrics			
<b>Street Address</b>					<b>Street Address</b>			
62 Seaview Ave					117 Beechwood Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02921-3315

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Patrick		McHugh		Quality Painting		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 6755					PO Box 11903		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Jackson			WY	83002	Jackson	WY	83002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Marina		McIntire		Retired		
<b>Street Address</b>					<b>Street Address</b>		
13505 SE River Rd, Apt 3005					13505 SE River Rd, Apt 3005		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Portland			OR	97222	Portland	OR	97222

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael	E	McKelvy		Gilbane Building Company		
<b>Street Address</b>					<b>Street Address</b>		
10 Cherry Brook Rd					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Weston			MA	02493-1306	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Fiona		McKenna		Golden Gate University		
<b>Street Address</b>					<b>Street Address</b>		
5838 California St					536 Mission St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94121	San Francisco	CA	94105

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Florence		McKenna		Retired		
<b>Street Address</b>					<b>Street Address</b>		
11 Humboldt Avenue					11 Humboldt Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	W.	McKenna		McKenna Roofing			
<b>Street Address</b>					<b>Street Address</b>			
60 Frank St					241 Armistice Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02680

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Katharine	N.	McLean		Retired			
<b>Street Address</b>					<b>Street Address</b>			
58 Bailey Cir					58 Bailey Cir			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Windsor					South Windsor		CT	06074

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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			
	Francis	X	McMahon		Advocacy Solutions			
<b>Street Address</b>					<b>Street Address</b>			
One Shady Lane					4 Richmond Square			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/22/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		McNally		Retired			
<b>Street Address</b>					<b>Street Address</b>			
34 Mallard Cove Way					34 Mallard Cove Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Barrington		RI	02806-2743

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph		McNamara		Wine Warehouse			
<b>Street Address</b>					<b>Street Address</b>			
3629 Sheridge Dr					6550 E. Washington Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sherman Oaks					Los Angeles		CA	90040

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Pamela	W.	McNamara		Health Helm, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
237 Gaffney Rd					875 State Rd, Unit 11-161			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Dartmouth					Westport		MA	02790-2853

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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			
	Daniel	P.	McQuade		AECOM			
<b>Street Address</b>					<b>Street Address</b>			
1 Matthewson Ln					10 Orms St, #405			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Raymond		Meador		Waterson Terminal Services			
<b>Street Address</b>					<b>Street Address</b>			
50 Saint Francis Ln					35 Terminal Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Rafael					Providence		RI	02905-5507

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Jonathan		LawrenMechanic		Fried Frank			
<b>Street Address</b>					<b>Street Address</b>			
808 Broadway					375 Park Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10152

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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			
	Joshua	R.	Medeiros		Air Masters HVAC Services			
<b>Street Address</b>					<b>Street Address</b>			
14 New Meadow Rd					59 Turner St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Fall River		MA	02720



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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	P.	Mello		GTECH			
<b>Street Address</b>					<b>Street Address</b>			
63 Howland Ave					10 Memorial Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Jamestown					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Ada		Meltzer		Retired			
<b>Street Address</b>					<b>Street Address</b>			
16785 Kennedy Rd					16785 Kennedy Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Los Gatos					Los Gatos		CA	95032

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Edith	P.	Mendez		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1661 Pine St, Apt 935					1661 Pine St, Apt 935			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Michelle		Menning-Spero		Lincs			
<b>Street Address</b>					<b>Street Address</b>			
30 Greystone Terrace					30 Greystone Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portsmouth					Portsmouth		RI	02871

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Howard	A.	Merten	Jr.	Partridge Snow & Hahn, LLP			
<b>Street Address</b>					<b>Street Address</b>			
85 Dartmouth Avenue					180 South Main Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Kristine		Merz		Orange Square		
<b>Street Address</b>					<b>Street Address</b>		
161 Exchange St, Unit 303					163 Exchange St, Unit 303		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pawtucket			RI	02860-2276	Pawtucket	RI	02860-2276

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Vincent	J	Mesolella		REI, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
27 Paddock Drive					235 Promenade St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/06/2017		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		
	Ruth	W.	Messinger		American Jewish World Service		
<b>Street Address</b>					<b>Street Address</b>		
91 Central Park W					45 West 36th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023-4609	New York	NY	10018

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/16/2017		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		
	Keith		Mestrich		Amalgamated Bank		
<b>Street Address</b>					<b>Street Address</b>		
3615 Chesapeake St NW					1825 K Street NW		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Washington			DC	20008-2916	Washington	DC	20006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jeffrey	R.	Metz		Adam Leitman Bailey, P.C.		
<b>Street Address</b>					<b>Street Address</b>		
341 Strawtown Rd					120 Broadway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New City			NY	10956-6634	New York	NY	10271-0002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Steven		Metzger		Phoenix Medical Technologies			
<b>Street Address</b>					<b>Street Address</b>			
22 James Street					91 Clemence St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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			
	Ken		Meyerson		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
5 Hanover Rd					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scarsdale					New York		NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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			
	Robert		Migliaccio		Cameron & Mittleman			
<b>Street Address</b>					<b>Street Address</b>			
119 Ferry Lane					301 Promenade St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/11/2017		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	B.	Miles		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3306 Wake Robin Dr					3306 Wake Robin Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Shelburne					Shelburne		VT	05482

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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			
	Janice		Miller		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1266 West 20th Avenue					1266 West 20th Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Oshkosh					Oshkosh		WI	54902

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/02/2017		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		
	Jean		Miller		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 349					PO Box 349		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Arlington			VT	05250	Arlington	VT	05250

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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		
	Kathleen		Miller		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
607 Maryland Ave					607 Maryland Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Claremont			CA	91711	Claremont	CA	91711

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Madeline		Miller		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
526 Pine St					526 Pine St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Philadelphia			PA	19106	Philadelphia	PA	19106

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/11/2017		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		
	Richard		Thomas:Miller		Southcoast Hospital Group		
<b>Street Address</b>					<b>Street Address</b>		
23 Hiller Road					101 Page St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rochester			MA	02770	New Bedford	MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Steve		Miller		Origin Ventures		
<b>Street Address</b>					<b>Street Address</b>		
549 W. Randolph St					549 W. Randolph St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60661-2316	Chicago	IL	60661-2316

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	William	J.	Milner		Retired		
<b>Street Address</b>					<b>Street Address</b>		
800 Southerly Rd, Apt 922					800 Southerly Rd, Apt 922		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Townson			MD	21286	Townson	MD	21286

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Matthew	A.	Milton		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1035 Walled Lake Villa Dr, Apt 515					1035 Walled Lake Villa Dr, Apt 515		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Walled Lake			MI	48390	Walled Lake	MI	48390

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		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		
	Peter	J.	Miniati	III	Washington Trust		
<b>Street Address</b>					<b>Street Address</b>		
397 County Rd					156 Westminister St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806-2422	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/18/2017		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		
	Yaron	M.	Minsky		Jane t Capital		
<b>Street Address</b>					<b>Street Address</b>		
205 W. 86th St, Apt 112					250 Vesey St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024-3391	New York	NY	10281-1052

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/18/2017		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		
	Lisa	S.	Minsky-Primus		Aspire Healthcare		
<b>Street Address</b>					<b>Street Address</b>		
205 W. 86th St, Apt 112					333 Commerce St, #700		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024-3391	Nashville	TN	37201-1835

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/13/2017		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		
	Max		Minzner		University of New Mexico - School of Law		
<b>Street Address</b>					<b>Street Address</b>		
2700 Woodley Rd NW							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Washington			DC	20008-4154	Albuquerque	NM	87131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Lare		Mischo		Seattle Premier League		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1294							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sumner			WA	98390	Seattle	WA	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		Miskell		Wood Lumber Company		
<b>Street Address</b>					<b>Street Address</b>		
4 Snapper Lane					81 Locust St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Falmouth			MA	02540	Falmouth	MA	02540

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/29/2017		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		
	Riva		Beth Mittleman		Con Edison		
<b>Street Address</b>					<b>Street Address</b>		
14 Ridge Rd					122 East 124th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Croton on Hudson			NY	10520	New York	NY	10035

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Thompson	C.	Moffit		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1101 Watson Road					1101 Watson Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mount Pleasant			MI	48858	Mount Pleasant	MI	48858

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Stephen		Moio		CRM Modular Homes			
<b>Street Address</b>					<b>Street Address</b>			
278 Colonel John Gardner Rd					2143 Hartford Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Brenda		Monacelli		National Amusements			
<b>Street Address</b>					<b>Street Address</b>			
16 Morgan Ct					846 University Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Norwood		MA	02062

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Norbert		Mongeon		Providence Performing Arts Center			
<b>Street Address</b>					<b>Street Address</b>			
329 Stillwater Road					220 Weybossett Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/19/2017		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			
	Evalynn		Monsky-Duncan		Retired			
<b>Street Address</b>					<b>Street Address</b>			
285 Sylvest Dr, Apt 212					285 Sylvest Dr, Apt 212			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Montgomery					Montgomery		AL	36117

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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			
	Marianne	F	Monte		Shawmut Design and Construction			
<b>Street Address</b>					<b>Street Address</b>			
67 Dryden Ave					440 Lincoln Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Worcester		MA	01605-1910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/15/2017		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			
	Karyn		Monti		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
71 Green St - 2nd Fl					71 Green St - 2nd Fl			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
East Greenwich					East Greenwich		RI 02818	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	F. Paul		Mooney		Discovery Mint			
<b>Street Address</b>					<b>Street Address</b>			
39 Drowne Parkway					151 Exchange Street			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Rumford					Pawtucket		RI 02860	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Margaret		Moore		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
7771 57th Ave NE					7771 57th Ave NE			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Seattle					Seattle		WA 98115	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	S.	Morello		Morello Enterprises, LLC			
<b>Street Address</b>					<b>Street Address</b>			
134 Fuller St, Unit 4					482 Beacon St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Brookline					Boston		MA 02115	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		80.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	George		Morgan		Retired			
<b>Street Address</b>					<b>Street Address</b>			
336 Doyle Ave					336 Doyle Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Providence					Providence		RI 02906	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		14.29

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Beth		Morris		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
829 Constitution Dr					829 Constitution Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Foster City					Foster City		CA	94404

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Mark	B.	Morse		Law Office of Mark B. Morse			
<b>Street Address</b>					<b>Street Address</b>			
833 Hartford Avenue					833 Hartford Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Johnston		Ri	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		Morse-Fortier		Self-Employed Clinical Social Worker			
<b>Street Address</b>					<b>Street Address</b>			
20 Bernard St					220 Bernard St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lexington					Lexington		MA	02420

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Margaret	L.	Morton		Eversource			
<b>Street Address</b>					<b>Street Address</b>			
369 Pine St					56 Prospect St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Middletown					Hartford		CT	06103-2818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Thomas	V.	Moses		Moses, Afonso, Jackvony, Ltd			
<b>Street Address</b>					<b>Street Address</b>			
63 Chapin Rd					160 Westminster Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/11/2017		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		
	Constance		Mounce		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 534					PO Box 534		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Harleton			TX	75651	Harleton	TX	75651

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Gloria		Muchler		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 310114					PO Box 310114		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New Braunfels			TX	78131	New Braunfels	TX	78131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Gloria		Muchler		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 310114					PO Box 310114		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New Braunfels			TX	78131	New Braunfels	TX	78131

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	Howard	W	Muchnick		Muchnick Golieb & Golieb		
<b>Street Address</b>					<b>Street Address</b>		
2 East End Avenue, 5 B/C					200 Park Ave S, #1700		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10021	New York	NY	10003

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/14/2017		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		
	Deanna	M.	Mulligan		Guardian Life Ins. Co.		
<b>Street Address</b>					<b>Street Address</b>		
40 Mooreland Rd					7 Hanover Sq		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwich			CT	06831	New York	NY	10004-2616

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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			
	Lisa		Munro		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1514 Wood Ln					1514 Wood Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Madison					Madison		WI	53705

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/06/2017		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			
	Daniel		Murray		Hinckley Allen			
<b>Street Address</b>					<b>Street Address</b>			
20 Powhattan St					1 Financial Plaza, #1800			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Richard		Nadeau	Jr.	Partridge Snow & Hahn, LLP			
<b>Street Address</b>					<b>Street Address</b>			
29 Homestead Ave.					180 South Main Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Smithfield					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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			
	Cherrie		Nanninga		RES Group			
<b>Street Address</b>					<b>Street Address</b>			
250 W. 24th St, #2EW					84 Cherrywood Drive			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New Hyde Park		NY	11040

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Steven		Nappa		Construction Advisors, LLC			
<b>Street Address</b>					<b>Street Address</b>			
21 Barnes St					PO Box 2501			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02906-0501

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Evelyn		Neely		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
14400 Montfort Dr					14400 Montfort Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Dallas			TX	75254	Dallas	TX	75254

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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		
	Elaine		Nelson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
284 Sunset Blvd.					284 Sunset Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Port Townsend			WA	98368	Port Townsend	WA	98368

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/08/2017		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		
	Bonnie		New		Retired		
<b>Street Address</b>					<b>Street Address</b>		
4045 Stonegate Drive					4045 Stonegate Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Hood River			OR	97031	Hood River	OR	97031

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Greta		Newman		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
39 Steppingstone Lane					39 Steppingstone Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Great Neck			NY	11024	Great Neck	NY	11024

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		Nicholson		Nicholson Engineering Co.		
<b>Street Address</b>					<b>Street Address</b>		
563 Wellesley St					563 Wellesley St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Birmingham			MI	48009	Birmingham	MI	48009

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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		
	Judith		Niedbala		Perspectives Corp		
<b>Street Address</b>					<b>Street Address</b>		
51 Peace Pipe Trl S					1130 Ten Rod Rd,		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Wakefield			RI	02879	North Kingstown	RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Mary Ann		Niemczycki		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
573 Grover Cleveland Hwy					573 Grover Cleveland Hwy		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Buffalo			NY	14226	Buffalo	NY	14226

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		6.25

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Wendy		Nilsen		National Science Foundation		
<b>Street Address</b>					<b>Street Address</b>		
217 Mill St					4201 Wilson Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Occoquan			VA	22125	Arlington	VA	22230

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Danita		Noel		Noel Interior Design		
<b>Street Address</b>					<b>Street Address</b>		
100 Cesco Lane					100 Cesco Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lafayette			LA	70506	Lafayette	LA	70506

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Richard	S.	Novak		Wyss Institute		
<b>Street Address</b>					<b>Street Address</b>		
36 Nason Hill Rd					Center for Life Science Bldg		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sherborn			MA	01770	Boston	MA	02115

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/31/2017		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			
	Bogdan		Nowak		Rhode Island Novelty			
<b>Street Address</b>					<b>Street Address</b>			
701 South Olive Ave, Apt 1712					350 Commerce Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Palm Beach					Fall River		MA	02720-4746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Carol		Nuesslein		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
3531 Agua Sarca Ct NE					3531 Agua Sarca Ct NE			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Albuquerque					Albuquerque		NM	87111

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas		Nutter		Interface			
<b>Street Address</b>					<b>Street Address</b>			
28 Deer Common Dr					One Wells Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Scituate					Newton		MA	02459

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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			
	James		Nyberg		LeadingAge RI			
<b>Street Address</b>					<b>Street Address</b>			
24 Andersen Court					1 Virginia Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerly					Providence		RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		6.25

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph		Nyderek		Retired			
<b>Street Address</b>					<b>Street Address</b>			
20615 SE 294th Way					20615 SE 294th Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Kent					Kent		WA	98042

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/28/2017		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			
	Erica	M	O'Connell	Esq.	Bianchi & Brouillard, PC			
<b>Street Address</b>					<b>Street Address</b>			
55 Fery Ln					56 Pine Street, Suite 250			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Kevin	J.	O'Connor		Hinckley Allen			
<b>Street Address</b>					<b>Street Address</b>			
55 Glen St					100 Westminster Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Dover					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Carol		O'Donnell		CRM Modular Homes			
<b>Street Address</b>					<b>Street Address</b>			
278 Colonel John Gardner Rd					2143 Hartford Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Paul		O'Donnell		Hinckley, Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
28 State Street					28 State Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Boston					Boston		MA	02109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Colleen		O'Hara		Colleen O'Hara, Family Therapist			
<b>Street Address</b>					<b>Street Address</b>			
269 South Berkeley Ave					269 South Berkeley Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pasadena					Pasadena		CA	91107

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Barbara	A.	O'Kelly		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2576 Woodhill Dr					2576 Woodhill Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Okemos			MI	48864	Okemos	MI	48864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Kathleen		O'Rourke		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
6813 Mercedes Ave					6813 Mercedes Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Citrus Heights			CA	95621	Citrus Heights	CA	95621

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Patricia	A.	Octeau		William A. Farrell & Associates LLC		
<b>Street Address</b>					<b>Street Address</b>		
62 Wolf Hill Rd					10 Memorial BLVD., Suite 1001		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Smithfield			RI	02917	Providence	RI	02903-1152

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Nobuko	A.	Ohashi		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10654 Montrose Ave					10654 Montrose Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bethesda			MD	20814	Bethesda	MD	20814

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/27/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul	G.	Olean		Gilbane Building Co.		
<b>Street Address</b>					<b>Street Address</b>		
16 Fairmount Ave					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02903



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/24/2017		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			
	Philip		Oliveira		Southcoast Health System, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
94 County Street					874 Purchase St			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Lakeville					New Bedford		MA 02740	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Lisbeth	R.	Oliver		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
22 East 94th St								
<b>City</b>					<b>City</b>		<b>State Zip</b>	
New York					NY		10128-0612	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Leon	J.	Olivier		Eversource			
<b>Street Address</b>					<b>Street Address</b>			
111-2 Shore Rd					PO Box 270			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Old Lyme					Hartford		CT 06140-0270	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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			
	Kristin		Olsson		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
11127 Midway Rd					11127 Midway Rd			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Dallas					Dallas		TX 75229	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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			
	Faye		Ono		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
705 S. Alton Way					705 S. Alton Way			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Denver					Denver		CO 80247	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/20/2017		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			
	Jonathan		Orent		Motley Rice LLC			
<b>Street Address</b>					<b>Street Address</b>			
64 Capwell Ave					321 S. Main St, #200			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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			
	Paula		Orosz		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1520 Este Ave					1520 Este Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Napa					Napa		CA	94558

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Eugene	R.	Orsi		Cole Cabinet Co., Inc.			
<b>Street Address</b>					<b>Street Address</b>			
35 Gilcrest Dr					530 Wellington Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick					Cranston		RI	02910-2950

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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			
	Rosalie		Oughterson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
825 Small Dr					825 Small Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lake Worth					Lake Worth		FL	33461

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/26/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jennifer		Page		Retired			
<b>Street Address</b>					<b>Street Address</b>			
15 Stanley Rd					15 Stanley Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Belmont					Belmont		MA	02478

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/08/2017		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			
	Jacqueline		Pagel		Pella Windows & Doors			
<b>Street Address</b>					<b>Street Address</b>			
100 Hilltop Dr					222 Post Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					Westerly		RI	02891-2683

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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	J.	Paglilarini		Pierce Atwood LLP			
<b>Street Address</b>					<b>Street Address</b>			
16 Central Ave					72 Pine St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Providence		RI	02903-2846

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	M. Teresa		Paiva Weed		Hospital Association of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
48 Admiral Kalbfus Rd					100 Midway Rd, #21			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Newport					Cranston		RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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			
	Edna		Panaggio		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
200 Hoffman Ave					200 Hoffman Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920-4529

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/01/2017		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			
	Edna		Panaggio		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
200 Hoffman Ave					200 Hoffman Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920-4529

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Edna		Panaggio		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
200 Hoffiman Ave					200 Hoffiman Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Cranston		RI	02920-4529

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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			
	Nina		Pande		Skills for Rhode Island's Future			
<b>Street Address</b>					<b>Street Address</b>			
182 Adelaide Ave					30 Exchange Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	Nina		Pande		Skills for Rhode Island's Future			
<b>Street Address</b>					<b>Street Address</b>			
182 Adelaide Ave					30 Exchange Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		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			
	Nina		Pande		Skills for Rhode Island's Future			
<b>Street Address</b>					<b>Street Address</b>			
182 Adelaide Ave					30 Exchange Terrace			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	Melva		Pante		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4104 24th St, #751					4104 24th St, #751			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94114

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Thomas	F	Panza		Panza, Maurer & Maynard		
<b>Street Address</b>					<b>Street Address</b>		
3600 North Federal Highway					2400 E. Commercial Blvd., SAte 905		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fort Lauderdale			FL	33308	Fort Lauderdale	FL	33308

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/13/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	R	Paolino	Jr	Paolino Properties		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1576					100 Westminster St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02901	Providence	RI	02901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Phil		Paquin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
13 Meadowsweet Trail					13 Meadowsweet Trail		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Attleboro			MA	02703-6555	Attleboro	MA	02703-6555

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	L	Parent		Garofolo & Associates		
<b>Street Address</b>					<b>Street Address</b>		
4 Rosewood Ct					85 Corliss Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Coventry			RI	02816	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Jeanne	E.	Parenteau		Retired		
<b>Street Address</b>					<b>Street Address</b>		
940 Quaker Lane					940 Quaker Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818	East Greenwich	RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Jeanne	E.	Parenteau		Retired			
<b>Street Address</b>					<b>Street Address</b>			
940 Quaker Lane					940 Quaker Lane			
<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	04/19/2017		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			
	Stephen	M.	Parisi		Brunca Waterproofing Corp.			
<b>Street Address</b>					<b>Street Address</b>			
22 Lonsdale St					43 Wilson St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Warwick					Providence		RI	02907-2430

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		40.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Janice		Parker		Retired			
<b>Street Address</b>					<b>Street Address</b>			
87 Wyassup Rd					87 Wyassup Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Stonington					North Stonington		CT	06359

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/20/2017		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			
	Jonathan		Parker		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1611 Hobart Street NW					1611 Hobart Street NW			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20009

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Judith	A.	Parker		Astor Children's Services			
<b>Street Address</b>					<b>Street Address</b>			
1658 Cherry Farm Rd					6339 Mill Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Harrisville					Rhinebeck		NY	12572

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Melinda		Parmer		Discovery Green Conservancy		
<b>Street Address</b>					<b>Street Address</b>		
414 E Eleanor St					1500 McKinney St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Houston			TX	77009	Houston	TX	77010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	James		Partridge		Edward Rowse Architects		
<b>Street Address</b>					<b>Street Address</b>		
51 Sylvan Rd					400 Massasoit Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916-1551	East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	John	J.	Partridge		Partridge Snow and Hahn		
<b>Street Address</b>					<b>Street Address</b>		
9 John St.					180 South Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906-1007	Providence	Ri	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Regina		Partridge		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
9 John Street					9 John Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Word		Peake		Long River Ventures		
<b>Street Address</b>					<b>Street Address</b>		
32 Woodlot Rd.					7 N. Pleasant St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Amherst			MA	01002	Amherst	MA	01002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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		
	Diane		Pearce		Retired		
<b>Street Address</b>					<b>Street Address</b>		
102 Mallard Dr					102 Mallard Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lewes			DE	19958	Lewes	DE	19958

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Donna		Pedroza		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1801 Shoreline Dr					1801 Shoreline Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Alameda			CA	94501	Alameda	CA	94501

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/28/2017		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		
	Constance	R	Pemmerl		Real Estate and Financial Consulting Services		
<b>Street Address</b>					<b>Street Address</b>		
67 Orchard Ave					44 Danforth St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Rehoboth	MA	02769

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Deborah	C.	Pennington		Retired		
<b>Street Address</b>					<b>Street Address</b>		
898 Richart Lane					898 Richart Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwood			IN	46142	Greenwood	IN	46142

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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	M.	Pennoyer		Patterson Belknap Webb and Tyler LLP		
<b>Street Address</b>					<b>Street Address</b>		
33 E. 70th St					1133 Avenue of the Americas		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10021-4985	New York	NY	10036



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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			
	Frances		Pepper		Community Volunteer			
<b>Street Address</b>					<b>Street Address</b>			
233 Oliver Road					233 Oliver Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cincinnati					Cincinnati		OH	45215

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Laura		Perciasepe		Penguin Random House			
<b>Street Address</b>					<b>Street Address</b>			
151 Joralemon St					1745 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					New York		NY	10019

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Althea		Perez		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
605 W. Wakefield Blvd.					605 W. Wakefield Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Winsted					Winsted		CT	06098

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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			
	Ruth		Perfido		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4 South Rd					4 South Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Key Largo					Key Largo		FL	33037-3729

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		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			
	Ruth		Perfido		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4 South Rd					4 South Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Key Largo					Key Largo		FL	33037-3729

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Kenneth		Perreira		Coast Realty			
<b>Street Address</b>					<b>Street Address</b>			
32 Cypress Dr					1 Realty Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Swansea					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Elizabeth	M.	Pesce		Consolidated Concrete			
<b>Street Address</b>					<b>Street Address</b>			
416 New Meadow Rd					835 Taunton Ave, Unit 1			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					East Providence		RI	02914-1600

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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	R	Pesce		Coast Realty LLC			
<b>Street Address</b>					<b>Street Address</b>			
5 Lori Ellen Dr					1 Realty Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Marissa		Pesce		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
5 Lori Ellen Dr					5 Lori Ellen Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/25/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	A.	Peterchak		OPPI, LLC			
<b>Street Address</b>					<b>Street Address</b>			
304 S. Lincoln St					18 West 1st St, #15			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hinsdale					Hinsdale		IL	60521-4173

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		
	Ann		Peters		Retired		
<b>Street Address</b>					<b>Street Address</b>		
55 South Judd Street					55 South Judd Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Honolulu			HI	96817	Honolulu	HI	96817

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		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		
	Frederick		Peters		Warburg Realty		
<b>Street Address</b>					<b>Street Address</b>		
654 Madison Ave					654 Madison Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10065-8440	New York	NY	10065-8440

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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		
	Anne		Petersen		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 589					PO Box 589		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Douglas			MI	49406	Douglas	MI	49406

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/15/2017		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		
	Anne		Petersen		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 589					PO Box 589		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Douglas			MI	49406	Douglas	MI	49406

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/26/2017		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		
	Alan		Peterson		Robinwood Consulting LLC		
<b>Street Address</b>					<b>Street Address</b>		
646 Plum Tree Toad					566 W Adams St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Glen Ellyn			IL	60137	Chicago	IL	60661

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Ellen		Peterson		Kaiser Permanente		
<b>Street Address</b>					<b>Street Address</b>		
15 Harte Ave					1 Kaiser Plaza		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Rafael			CA	94901	Oakland	CA	94612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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	Petrarca		Providence Auto Body		
<b>Street Address</b>					<b>Street Address</b>		
2 Michael Drive					350 Silver Spring St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/16/2017		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		
	Michelle		Petrarca		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1 Michael Drive					1 Michael Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Peter	J	Petrarca		Petrarca & Petrarca		
<b>Street Address</b>					<b>Street Address</b>		
1 Michael Dr					330 Silver Spring Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Sandra		Petrarca		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2 Michael Drive					2 Michael Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Jina	N	Petrarca-Karampetsos		Petrarca & Petarca		
<b>Street Address</b>					<b>Street Address</b>		
2 Grandstand Dr					330 Silver Spring Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Guido	J	Petrosinelli		Mineral Enterprises Inc.		
<b>Street Address</b>					<b>Street Address</b>		
4 Stony Brook Ln					750 Mineral Spring Avenue		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Scituate			RI	02831	Pawtucket	RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul		Phillips		Paul's Carpet, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
32 Shaw Rd					3 Bert St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brockton			MA	02301-4626	West Bridgewater	MA	02379-1038

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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		Piccoli		D L Piccoli Assoc.		
<b>Street Address</b>					<b>Street Address</b>		
66 Pavilion Ave					66 Pavilion Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02905	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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 Properties (Picerne Homes)		
<b>Street Address</b>					<b>Street Address</b>		
75 Lambert Lind Highway					75 Lambert Lind Highway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02886	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Donna		Picerne Uritescu		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
122 Adams Point Road					122 Adams Point Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Barrington	RI	02806

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Irene	A.	Pickhardt		Texas Association for Environmental Education		
<b>Street Address</b>					<b>Street Address</b>		
3311 Bryker Dr					1701 North Congress Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Austin			TX	78703	Austin	TX	78701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	John		Pierson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
503 Oakland Avenue SE					503 Oakland Avenue SE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Atlanta			GA	30312	Atlanta	GA	30312

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/15/2017		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		
	Gregory		Pine		MPA Healthcare Solutions		
<b>Street Address</b>					<b>Street Address</b>		
333 W. Huibbard St					1 E. Wacker Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60654-4929	Chicago	IL	60601-1474

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Laura	A	Pisaturo		State of Rhode Island		
<b>Street Address</b>					<b>Street Address</b>		
93 Apple Tree Lane					82 Smith St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02888	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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		
	Mark	A.	Pogue		Locke Lord LLP		
<b>Street Address</b>					<b>Street Address</b>		
5 Atlantic Crossing					2800 Financial Plz		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Gloria		Pohler		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7280 Hudson Rd					7280 Hudson Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kent			OH	44240	Kent	OH	44240

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/24/2017		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		
	Dianna		Poissant		ELITech Group		
<b>Street Address</b>					<b>Street Address</b>		
59 Beach Point Drive					370 West 1700 South		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Riverside			RI	02915	Logan	UT	84321

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Anthony	M.	Ponte		Ponte Equities		
<b>Street Address</b>					<b>Street Address</b>		
232 Oakview Ave					268 West St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Oceanside			NY	11572-2353	New York	NY	10013

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/16/2017		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		
	Sarah	Y.	Pontius		CBRE		
<b>Street Address</b>					<b>Street Address</b>		
27 W. 72nd St, Apt 402					200 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023	New York	NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Pope		Retired			
<b>Street Address</b>					<b>Street Address</b>			
7910 W. Cortland St					7910 W. Cortland St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Elmwood Park					Elmwood Park		IL	60707

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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			
	Gregory		Porcaro		Otrando Porcaro			
<b>Street Address</b>					<b>Street Address</b>			
50 Bluebird Lane					2258 Post Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Warwick		RI	02866

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		12.50

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Suzana		Potene		Retired			
<b>Street Address</b>					<b>Street Address</b>			
28-01 Ditmars Blvd.					28-01 Ditmars Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Astoria					Astoria		NY	11105

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Jacqueline		Prager		Retired			
<b>Street Address</b>					<b>Street Address</b>			
5200 Keller Springs Rd, Apt 1117					5200 Keller Springs Rd, Apt 1117			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Dallas					Dallas		TX	75248

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/31/2017		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			
	Mukesh		Prasad		Weill Cornell Medical College			
<b>Street Address</b>					<b>Street Address</b>			
530 E 76th St					1305 York Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10021-5663



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Gabriele		Prater		Gabriele Prater, Attorney at Law		
Street Address					Street Address		
12806 Caminito Beso					12806 Caminito Beso		
City		State	Zip		City	State	Zip
San Diego		CA	92130		San Diego	CA	92130

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	James	J	Prescott		Marcum, LLP		
Street Address					Street Address		
4 Meadow Cir					155 South Main St		
City		State	Zip		City	State	Zip
Barrington		RI	02806		Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Lucy	Ann	Price		Retired		
Street Address					Street Address		
17140 Callaway Rd					17140 Callaway Rd		
City		State	Zip		City	State	Zip
Callaway		VA	24067		Callaway	VA	24067

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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		
	Richard	A.	Primus		University of Michigan Law School		
Street Address					Street Address		
1532 Sheridan Dr					625 South State Street		
City		State	Zip		City	State	Zip
Ann Arbor		MI	48104		Ann Arbor	MI	48109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/30/2017		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		
	R Bruce		Pruitt		Retired		
Street Address					Street Address		
81 Dennett St					81 Dennett St		
City		State	Zip		City	State	Zip
Portsmouth		NH	03801		Portsmouth	NH	03801

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas	E	Purcell	Jr.	Dr. Thomas E. Purcell		
<b>Street Address</b>					<b>Street Address</b>		
220 River Farm Dr					455 Toll Gate Rd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas	E	Purcell	Jr.	Dr. Thomas E. Purcell		
<b>Street Address</b>					<b>Street Address</b>		
220 River Farm Dr					455 Toll Gate Rd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Shirley		Pyle		Retired		
<b>Street Address</b>					<b>Street Address</b>		
9346 Karen Dr					9346 Karen Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Crystal			MI	48818	Crystal	MI	48818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Humeraa		Qamar		Children's Medical Group		
<b>Street Address</b>					<b>Street Address</b>		
3275 NW 85th Ter					1749 SE 25th Loop		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Ocala			FL	34482	Ocala	FL	34471

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Connie		Quackenbush		Reading Public Schools		
<b>Street Address</b>					<b>Street Address</b>		
17 Winthrop Ave					82 Oakland Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Reading			MA	01867	Reading	MA	01867

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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			
	Julia	M.	Quagliata		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 2783					PO Box 2783			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Setauket					East Setauket		NY	11733

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Edith		Quevedo		Retired			
<b>Street Address</b>					<b>Street Address</b>			
7955 Magnolia Avenue					7955 Magnolia Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Riverside					Riverside		CA	92504

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Abby		Rampone		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
20 E. George St					99 Windsong Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Cumberland		RI	02864-2728

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Belle		Rampone		Retired			
<b>Street Address</b>					<b>Street Address</b>			
14 E Butterfly Way					14 E Butterfly Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Daniel		Rampone		Hart Engineering Corp			
<b>Street Address</b>					<b>Street Address</b>			
20 E. George St					99 Windsong Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		Rampone		Hart Engineering		
<b>Street Address</b>					<b>Street Address</b>		
14 E. Butterfly Way					800 Scenic View Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Nicholas	A	Rampone		Providence Auto Body		
<b>Street Address</b>					<b>Street Address</b>		
2 Kern Acre Dr					350 Silver Spring Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919	Providence	RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/07/2017		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		
	Paulette		Rampone		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2 Kern Acre Drive					2 Kern Acre Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Johnston			RI	02919	Johnston	RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Linda		Ramus		Retired		
<b>Street Address</b>					<b>Street Address</b>		
34173 Cromwell Pl					34173 Cromwell Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fremont			CA	94555	Fremont	CA	94555

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Tony		Raposo		William Anthony Excavating, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
11 Birchwood Ln					3666 Quaker Lane		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Coventry			RI	02816	No. Kingstown	RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Joyce	E.	Rasmussen		Retired		
Street Address					Street Address		
800 Freeman Lane, #106					800 Freeman Lane, #106		
City		State	Zip		City	State	Zip
Grass Valley		CA	95949		Grass Valley	CA	95949

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Marshall		Raucci		Prime, Buchholz & Associates		
Street Address					Street Address		
100 Fountain St					273 Corporate Dr, Suite 250		
City		State	Zip		City	State	Zip
Providence		RI	02903-1845		Portsmouth	NH	03801

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Jessica		Rauch		Parent Resource Center		
Street Address					Street Address		
95 Soundview Dr					232 Main St		
City		State	Zip		City	State	Zip
Port Washington		NY	11050		Port Washington	NY	11050

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/06/2017		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		
	Richard		Ravitch		Ravitch, Rice & Co.		
Street Address					Street Address		
1115 5th Ave					610 Fifth Avenue		
City		State	Zip		City	State	Zip
New York		NY	10128-0100		New York	NY	10020

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Jill		PearsonReider		Homemaker		
Street Address					Street Address		
49 Aspec Lane NE					49 Aspec Lane NE		
City		State	Zip		City	State	Zip
Grand Rapids		MI	49546		Grand Rapids	MI	49546

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Christopher	W.	Reilly		The Bradford Group		
<b>Street Address</b>					<b>Street Address</b>		
47 Parsonage Way					205 Governor St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Attleboro			MA	02703	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Jackie		Reilly		YMCA		
<b>Street Address</b>					<b>Street Address</b>		
324 Rocking M Road					465 Buda Sportsplex Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kyle			TX	78640	Buda	TX	78610

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Lynn		Reiman		UPS		
<b>Street Address</b>					<b>Street Address</b>		
650 Jardin Court					12380 Morris Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Alpharetta			GA	30022	Alpharetta	GA	30005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	Richard	N.	Reist		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1702 S. Pennsylvania Ave					1702 S. Pennsylvania Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lansing			MI	48910	Lansing	MI	48910

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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		
	Charles	R.	Reppucci		Hinckley Allen & Synder, LLP		
<b>Street Address</b>					<b>Street Address</b>		
215 Sunnybrook Farm Road					100 Westminster St, #1500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/11/2017		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			
	Elyse		Resch		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3001 Linda Ln					3001 Linda Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Santa Monica					Santa Monica		CA	90405

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Edmund	A	Restivo	Jr.	Restivo Monacelli LLP			
<b>Street Address</b>					<b>Street Address</b>			
36 Exchange Terrace					36 Exchange Ter # 3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	Linda	J.	Reynolds		Roofing Concepts			
<b>Street Address</b>					<b>Street Address</b>			
216 Briarcliff Ave.					1500 South County Trail			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					East Greenwich		RI	02818

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Kenneth	R.	Rezendes		JRD Inc.			
<b>Street Address</b>					<b>Street Address</b>			
3 Sammys Ln					3 Sammys Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Assonet					Assonet		MA	02702

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/18/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jean	G	Rhau		Codec International Ministry			
<b>Street Address</b>					<b>Street Address</b>			
384 Union Ave					275 Reservoir Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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			
	Jean	G	Rhau		Codec International Ministry			
<b>Street Address</b>					<b>Street Address</b>			
384 Union Ave					275 Reservoir Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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			
	Jean	G	Rhau		Codec International Ministry			
<b>Street Address</b>					<b>Street Address</b>			
384 Union Ave					275 Reservoir Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Jean	G	Rhau		Codec International Ministry			
<b>Street Address</b>					<b>Street Address</b>			
384 Union Ave					275 Reservoir Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cranston					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Janet		Ricci		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1 West Exchange Street, Unit 1907					1 West Exchange Street, Unit 1907			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/15/2017		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			
	Jessica	L	Ricci		Jessica Ricci Jewlery			
<b>Street Address</b>					<b>Street Address</b>			
102 Tobey St, Unit 303					65 Weybosset St, Ste 114			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903-2830



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Stefanie	M.	Ricci		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
210 Blackstone Blvd.					210 Blackstone Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Edward	W	Ricci	II	Duro Industries		
<b>Street Address</b>					<b>Street Address</b>		
210 Blackstone Blvd					110 Chace St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Fall River	MA	02724

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/15/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Edward	F.	Ricci	Jr.	Retired		
<b>Street Address</b>					<b>Street Address</b>		
2700 Donald Ross Rd					2700 Donald Ross Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Palm Beach Gardens			FL	33410-1107	Palm Beach Gardens	FL	33410-1107

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Edward		Ricci	Sr.	Retired		
<b>Street Address</b>					<b>Street Address</b>		
13361 Marsh Lndg					13361 Marsh Lndg		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Palm Beach			FL	33418	West Palm Beach	FL	33418

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		
	Mary Ann		Rice		Owen Blicksilver Public Relations, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
2 Filbert Street					2 Filbert Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Garden City			NY	11530	Garden City	NY	11530

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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		
	Philip		Rich		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10 Hazelwood Terrace					10 Hazelwood Terrace		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pittsfield			MA	01201	Pittsfield	MA	01201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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		
	Rebecca		Richards		Rebecca Richards, Self-Employed Entrepreneur		
<b>Street Address</b>					<b>Street Address</b>		
2051 N. Howe St					2051 N. Howe St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60614-4413	Chicago	IL	60614-4413

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Donald		Richardson		Donald S. Richardson AIA		
<b>Street Address</b>					<b>Street Address</b>		
410 Benefit St					410 Benefit St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903-2925	Providence	RI	02903-2925

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Laurose	T.	Richter		Retired		
<b>Street Address</b>					<b>Street Address</b>		
620 Sand Hill Rd					620 Sand Hill Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Palo Alto			CA	94304	Palo Alto	CA	94304

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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		
	Larry	D.	Riggs		Pare Corp.		
<b>Street Address</b>					<b>Street Address</b>		
8 Blackstone Valley Place					8 Blackstone Valley Pl		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Lincoln	RI	02865-1145

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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			
	Ramneek	K.	Rikhy		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
400 E. 56th St, Apt 5N					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Rebecca		Riley		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4100 Main Rd					4100 Main Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tiverton					Tiverton		RI	02878

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/17/2017		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			
	Rebecca		Riley		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4100 Main Rd					4100 Main Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tiverton					Tiverton		RI	02878

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	John	L.	Rinfrette		South County Mechanical			
<b>Street Address</b>					<b>Street Address</b>			
20 Red Oak Dr					20 Red Oak Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Wyoming					Wyoming		RI	02898

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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			
	Jane	F.	Rissler		Old Charles Town Library			
<b>Street Address</b>					<b>Street Address</b>			
4583 Kabletown Rd					200 E. Washington St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charles Town					Charles Town		WV	25414

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/25/2017		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		
	Susan		Rittscher		Center for Women and Enterprises		
<b>Street Address</b>					<b>Street Address</b>		
8 Irving Avenue					132 George S Cohan Blvd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02903-4410

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Carol		Rizzardi		Retired		
<b>Street Address</b>					<b>Street Address</b>		
27 Burning Bush Dr					27 Burning Bush Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Palm Coast			FL	32137	Palm Coast	FL	32137

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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		Ro		Barbara Ro, Self-Employed Therapist		
<b>Street Address</b>					<b>Street Address</b>		
1755 E. 55th St, #701					1755 E. 55th St, #701		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60615	Chicago	IL	60615

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Ailene		Robinson		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
282 Beacon St					282 Beacon St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boston			MA	02116	Boston	MA	02116

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		Robinson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1215 Arborview Blvd.					1215 Arborview Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Ann Arbor			MI	48103	Ann Arbor	MI	48103

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Laurie	E.	Robinson		Swan Valley School		
<b>Street Address</b>					<b>Street Address</b>		
5690 Yellowcress Dr					8380 O'Hern Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saginar			MI	48603	Saginar	MI	48609

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		14.29

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas		Robinson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
828 Alvarado St					828 Alvarado St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94114	San Francisco	CA	94114

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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	A.	Rocchio	Jr.	John Rocchio Corp.		
<b>Street Address</b>					<b>Street Address</b>		
4 Old Farm Road					20 Lark Industrial Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818	Greenville	RI	02828

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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	A.	Rocchio	MD	Retired Surgeon		
<b>Street Address</b>					<b>Street Address</b>		
530 E Shore Rd					530 E Shore Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Jamestown			RI	02835-1716	Jamestown	RI	02835

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Pamela	L.	Roderick		Retired		
<b>Street Address</b>					<b>Street Address</b>		
111 Hicks St, Apt 25B					111 Hicks St, Apt 25B		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Brooklyn			NY	11201	Brooklyn	NY	11201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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			
	Barbara		Rogers		Newton Country Day School			
<b>Street Address</b>					<b>Street Address</b>			
193 Oak Street					193 Oak Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Newton					Newton		MA	02464

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Helen	S.	Rogers		Rogers, Kamm & Shea			
<b>Street Address</b>					<b>Street Address</b>			
2205 State St					2205 State St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Nashville					Nashville		TN	37203

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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			
	Patsy		Rogers		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 616					PO Box 616			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New Suffolk					New Suffolk		NY	11956

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Charles	F.	Rogers	Jr.	Locke Lord, LLP			
<b>Street Address</b>					<b>Street Address</b>			
486 Wayland Avenue					2800 Financial Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/18/2017		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			
	Luzita		Roll		Seattle Public Schools			
<b>Street Address</b>					<b>Street Address</b>			
120 NE 59th St					2445 3rd Ave S			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Seattle					Seattle		WA	98134

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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			
	Frank	J.	Romeo		Beta Group, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
70 Fowler Street					6 Blackstone Valley Pl, Ste 100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Kingstown					Lincoln		RI	02865-1112

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Janet		Rosati		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
671 Boston Neck Road					671 Boston Neck Road			
<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	05/11/2017		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			
	Janet		Rosati		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
671 Boston Neck Road					671 Boston Neck Road			
<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	05/10/2017		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			
	Brendon	M.	Rose		Hart Engineering			
<b>Street Address</b>					<b>Street Address</b>			
49 Lowden St					800 Scenic View Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Cumberland		RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/01/2017		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			
	Edward		Rose		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2022 Chevy Chase Blvd.					2022 Chevy Chase Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Kalamazoo					Kalamazoo		MI	49008

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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		
	Jennafer	N.	Rose		Hart Engineering		
<b>Street Address</b>					<b>Street Address</b>		
49 Lowden Street					800 Scenic View Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pawtucket			RI	02860	Cumberland	RI	02864

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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		
	Jeffrey	A.	Rosen		Lazard		
<b>Street Address</b>					<b>Street Address</b>		
550 Park Ave					30 Rockefeller Plaza		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10065-7369	New York	NY	10112

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Rosen		Retired		
<b>Street Address</b>					<b>Street Address</b>		
184 Chace Ave					184 Chace Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Steven	I.	Rosenbaum		Poore & Rosenbaum LLP		
<b>Street Address</b>					<b>Street Address</b>		
18 Bancroft Ave					30 Exchange Terrace, #2		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newport			RI	02840-4243	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Burton	X.	Rosenberg		Seyfarth Shaw Fairweather & Geraldson		
<b>Street Address</b>					<b>Street Address</b>		
1040 N. Lake Shore Drive					131 South Dearborn Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611	Chicago	IL	60603



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Sheli	Z.	Rosenberg		Skadden, Arps, Slate, Meagher & Flom LLP & Affiliates		
<b>Street Address</b>					<b>Street Address</b>		
1040 N. Lake Shore Dr, Apt 33A					155 N. Wacker Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60611	Chicago	IL	60606

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Lisa		Rosenblum		Altice USA		
<b>Street Address</b>					<b>Street Address</b>		
115 Central Park W					1111 Stewart Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023-4198	Bethpage	NY	11714

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Felicia		Rosenfeld		Dance Resource Center of Greater Los Angeles		
<b>Street Address</b>					<b>Street Address</b>		
722 California Ave					3520 Overland Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Venice			CA	90291	Los Angeles	CA	90034

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		7.50

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Sandra		Rosengarten		Sandra Rosengarten, Self Employed		
<b>Street Address</b>					<b>Street Address</b>		
9 Pine Drive					9 Pine Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Port Washington			NY	11050	Port Washington	NY	11050

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	Lizanne		Rosenstein		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 237168					PO Box 237168		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023-0031	New York	NY	10023-0031

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	Austin		Rosenthal		Surf 2 Live LB			
<b>Street Address</b>					<b>Street Address</b>			
1233 Beech St					830 Shore Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Atlantic Beach					Long Beach		NY	11561

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Debra		Rosenthal		Advanced Vision Care Associates			
<b>Street Address</b>					<b>Street Address</b>			
1233 Beech St, Unit 16					2691 Hylan Blvd., #3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Atlantic Beach					Staten Island		NY	10306

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/11/2017		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			
	Marisa		Rosenthal		Rouge Jardin LLC			
<b>Street Address</b>					<b>Street Address</b>			
88 Lexington Ave					53 W 36th St, Rm 302			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10018

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Russell		Rosenthal		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1233 Beech Street, Apt 16					1233 Beech Street, Apt 16			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Atlantic Beach					Atlantic Beach		NY	11509-1629

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/28/2017		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			
	Edward		Ross		Coastal Equities, LLC			
<b>Street Address</b>					<b>Street Address</b>			
132 Bristol Dr					2001 Marcus Ave, Suite W83			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Woodbury					Lake Success		NY	11042

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/12/2017		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		
	Scott		Ross		EH Scott, LLC		
<b>Street Address</b>					<b>Street Address</b>		
1544 Victoria Isle Way					1825 Main St, te 105		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Weston			FL	33327-1315	Weston	FL	33326-3683

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/24/2017		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		
	John	E	Roy		Atlas Scaffolding		
<b>Street Address</b>					<b>Street Address</b>		
193 Beacon Drive					80 Gilbane St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	Warwick	RI	02886-6902

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Jason	M.	Rua		Rua Dumont Audet (RDA) Insurance		
<b>Street Address</b>					<b>Street Address</b>		
16 Pine St.					155 North Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Somerset			MA	02726	Fall River	MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		Rubin		Hinckley Allen & Snyder LLP		
<b>Street Address</b>					<b>Street Address</b>		
33 Cambria Court					100 Westminster St, Suite 1500		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Pawtucket			RI	02860	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		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		
	Robert		Rubin		Retired		
<b>Street Address</b>					<b>Street Address</b>		
911 Park Ave					911 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10075-0385	New York	NY	10075-0385

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Patricia		Rubio		Retired		
<b>Street Address</b>					<b>Street Address</b>		
6 Avery St					6 Avery St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saratoga Springs			NY	12866	Saratoga Springs	NY	12866

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	William		Rudin		Rudin Management		
<b>Street Address</b>					<b>Street Address</b>		
345 Park Ave					345 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10154	New York	NY	10154

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Dominick	J.	Ruggerio		State of Rhode Island		
<b>Street Address</b>					<b>Street Address</b>		
42 Countryside Dr					82 Smith St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Providence			RI	02904	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	John	T	Ruggieri		Gilbane Building Co.		
<b>Street Address</b>					<b>Street Address</b>		
173 Mathewson Rd					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	C.	Ruppell		Perspectives Corp.		
<b>Street Address</b>					<b>Street Address</b>		
49 Pojac Point Rd					1130 Ten Rod Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Kingstown			RI	02852	North Kingstown	RI	02852

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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			
	Stephen	F.	Rutledge		Dimeo Construction			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 6					PO Box 6			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Norfolk					Norfolk		MA	02056-0006

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Kathleen		Ryan		AAFSC			
<b>Street Address</b>					<b>Street Address</b>			
341 E. 6th St					150 Court St, Ste 3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					Brooklyn		NY	11201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		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			
	Kathryn	L.	Ryan		Lycoming College			
<b>Street Address</b>					<b>Street Address</b>			
951 Hepburn St								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Williamsport					Williamsport		PA	17701

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Kevin		Ryan		AlleyCorp Enterprises			
<b>Street Address</b>					<b>Street Address</b>			
229 W. 43rd St					229 W. 43rd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10036

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Mark	T	Ryan		Moses Afonso Ryan			
<b>Street Address</b>					<b>Street Address</b>			
67 West Bay Drive					160 Westminster Street, Suite 400			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Providence		RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael	F	Ryan		National Grid			
<b>Street Address</b>					<b>Street Address</b>			
93 S Shore Rd					280 Melrose St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Little Compton					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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			
	Barbara	E.	Ryder		Retired			
<b>Street Address</b>					<b>Street Address</b>			
7441 Paurotis Ct					7441 Paurotis Ct			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sarasota					Sarasota		FL	34241

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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			
	James	P.	Sabra		Greater Fall River Development Corporation			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 4067					58 Franklin Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fall River					Fall River		MA	02720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Lenore		Salazar		Retired			
<b>Street Address</b>					<b>Street Address</b>			
401 E. 89th St, Apt 5N					401 E. 89th St, Apt 5N			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Judy		Saler		Town of Brookline			
<b>Street Address</b>					<b>Street Address</b>			
145 Cottage Rd					333 Washington St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Roxbury					Brookline		MA	02445

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/06/2017		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			
	Phillip		Salomon		First America Title Insurance Co.			
<b>Street Address</b>					<b>Street Address</b>			
5 Oakridge Rd					633 3rd Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
White Plains					New York		NY	10017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Alicia	J	Samolis		Partridge, Snow & Hahn LLP			
<b>Street Address</b>					<b>Street Address</b>			
555 So. Main St., Unit 324					40 Westminster St #1100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		Sams		Advancing Workplace and Women's Excellence			
<b>Street Address</b>					<b>Street Address</b>			
48 McClellan Street					145 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
	Credit/Debit Card	Individual	04/03/2017		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			
	Catherine		Samuels		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
11 Althea Ln					11 Althea Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Larchmont					Larchmont		NY	10538

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Larry		Sands		Disabled Vet			
<b>Street Address</b>					<b>Street Address</b>			
2136 Eleuthera Way					2136 Eleuthera Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Elizabeth City					Elizabeth City		NC	27909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		
	Lori	A	Santiago		Consolidated Concrete		
<b>Street Address</b>					<b>Street Address</b>		
196 Washington Rd					835 Taunton Ave # 1		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806	East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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		
	George		Santopietro		Coia & Lepore		
<b>Street Address</b>					<b>Street Address</b>		
5 Erica Drive					226 S. Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02903-7105

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Debra		Sartell		Self-Employer Writer		
<b>Street Address</b>					<b>Street Address</b>		
10 Hillpath St					10 Hillpath St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Corte Madera			CA	94925	Corte Madera	CA	94925

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Nancy	R.	Sato		Retired		
<b>Street Address</b>					<b>Street Address</b>		
77 7th Ave, Apt 12E					77 7th Ave, Apt 12E		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10011	New York	NY	10011

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		70.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Frances	F.	Saunders		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1746 Tanglewood Dr					1746 Tanglewood Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kissimmee			FL	34746	Kissimmee	FL	34746



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Jeremy	B.	Savage		Shechtman Halperin Savage LLP			
<b>Street Address</b>					<b>Street Address</b>			
1080 Main Street					1080 Main Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Pawtucket					Pawtucket		RI	02860-4947

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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		Savastano		Custom Drywall, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
82 Glenbrook Rd					63 Commercial Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		Savastano		Custom Drywall, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
82 Glenbrook Rd					63 Commercial Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Robert		Savastano		Custom Drywall, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
82 Glenbrook Rd					63 Commercial Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					East Providence		RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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	E.	Scanlon		American Aerial Equipment			
<b>Street Address</b>					<b>Street Address</b>			
7 Preston Drive					45 Alice Agnew Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					North Attleboro		MA	02763

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/08/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Thomas		Scarangelo		Thornton Tomasetti			
<b>Street Address</b>					<b>Street Address</b>			
141 E. 88th St					51 Madison Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10010-1603

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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			
	Juanita		Scarlett		Park Strategies LLC			
<b>Street Address</b>					<b>Street Address</b>			
598 St. Marks Ave					101 Park Avenue, Suite 2506			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					New York		NY	10178

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Helen		Schaeffer		St. Edward School			
<b>Street Address</b>					<b>Street Address</b>			
1401 Belle Plaine Ave					4343 W. Sunnyside Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Park Ridge					Chicago		IL	60630

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Sara		Schechter-Schoeman		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1823 Heyward St					1823 Heyward St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Columbia					Columbia		SC	29205

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Mary	T.	Schieffer		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3913 West Forest Home Avenue					3913 West Forest Home Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Milwaukee					Milwaukee		WI	53215

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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		
	Carol		Schira		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2395 Delaware Ave					2395 Delaware Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Santa Cruz			CA	95060	Santa Cruz	CA	95060

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Elaine		Schlechter		Retired		
<b>Street Address</b>					<b>Street Address</b>		
23331 Feather Palm Court					23331 Feather Palm Court		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Boca Raton			FL	33433-6125	Boca Raton	FL	33433-6125

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		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		
	Rob		Schlein		Sullivan & Cromwell LLP		
<b>Street Address</b>					<b>Street Address</b>		
488 Mansfield Ave					125 Broad Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Darien			CT	06820-2117	New York	NY	10004

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Lisa		Schlesinger		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
3 Sunny Meade					3 Sunny Meade		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saint Louis			MO	63124	Saint Louis	MO	63124

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/03/2017		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		
	Alvin		Schmertzler		Retired		
<b>Street Address</b>					<b>Street Address</b>		
142 Chestnut Circle					142 Chestnut Circle		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			MA	01773	Lincoln	MA	01773

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/11/2017		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			
	Alan	D.	Schnitzer		The Travelers Companies, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
1185 Park Ave, #11D					485 Lexington Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/18/2017		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			
	Anne	B.	Schnitzer		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1185 Park Ave, #11D					1185 Park Ave, #11D			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New Yoprk		NY	10128-1308

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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			
	Douglas		Schoen		Schoen Consulting			
<b>Street Address</b>					<b>Street Address</b>			
1111 Park Ave, Apt 6A					1111 Park Ave, Apt 6A			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10128-1234

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		90.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Robert		Schor		University of Rochester			
<b>Street Address</b>					<b>Street Address</b>			
10 Ambassador Dr					500 Joseph C. Wilson Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Rochester					Rochester		NY	14627

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/20/2017		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			
	Diana	C.	Schramm		Retired			
<b>Street Address</b>					<b>Street Address</b>			
5012 Boxhill Ln					5012 Boxhill Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Baltimore					Baltimore		MD	21210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Christopher		Schroeder		Advisor & Venture Investor			
<b>Street Address</b>					<b>Street Address</b>			
5627 Potomac Avenue NW					5627 Potomac Avenue			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Washington			DC	20016	Washington		DC	20016

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/20/2017		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			
	Mary Jo		Schuler		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
315 N. Euclid Ave					315 N. Euclid Ave			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Oak Park			IL	60302-2109	Oak Park		IL	60302-2109

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/20/2017		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			
	Stephen		Schuler		Wicklow Capital, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
315 N. Euclid Ave					53 Jackson Blvd.			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Oak Park			IL	60302-2109	Chicago		IL	60604

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/28/2017		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	J.	Schuss		Schuss Realty Associates, LLC			
<b>Street Address</b>					<b>Street Address</b>			
41 Royat St					155 Schmitt Blvd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Lido Beach			NY	11561-5111	Farmingdale		NY	11735

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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			
	Eric		Schuss		Schuss Realty Associates			
<b>Street Address</b>					<b>Street Address</b>			
48 Beaumont Dr					155 Schmitt Blvd			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Melville			NY	11747	Farmingdale		NY	11735

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Carl		Schwartz		Hunton & Williams		
<b>Street Address</b>					<b>Street Address</b>		
123 W. 88th St					200 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024-2406	New York	NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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	S.	Schwartz		Mandell, Schwartz & Boisclair Ltd		
<b>Street Address</b>					<b>Street Address</b>		
4 Elden Ct					One Park Row		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/25/2017		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		Schwartz		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2753 W. Bonnie Brook Ln					2753 W. Bonnie Brook Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Waukegan			IL	60087	Waukegan	IL	60087

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Francie		Schwarz		Los Angeles Public Library		
<b>Street Address</b>					<b>Street Address</b>		
1807 Bushnell Ave					630 W. 5th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
South Pasadena			CA	91030	Los Angeles	CA	90071

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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		
	Lois		Scott		Epoch Advisors		
<b>Street Address</b>					<b>Street Address</b>		
1807 N. Honore Street					121 N. LaSalle Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60622	Chicago	IL	60602-1239

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Melissa		Sedlis		Melissa M. Sedlis, MD			
<b>Street Address</b>					<b>Street Address</b>			
1235 Park Ave					56 E. 76th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10075

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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			
	Marie Kethia		Senatus		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
74 Pocasset street								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence							RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Pascaline		Servan-Schreiber		Zorro & Me Films			
<b>Street Address</b>					<b>Street Address</b>			
57 West 69th Street					24 Irving Place			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					Rockville Centre		NY	11570

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Alexandra		Sevilla		Blank Rome LLP			
<b>Street Address</b>					<b>Street Address</b>			
1401 Columbia Rd, NW, #110					600 New Hampshire Ave NW, #1100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20037

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/14/2017		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			
	Mary Ann		Shallcross-Smith		Dr. Day Care			
<b>Street Address</b>					<b>Street Address</b>			
6 Twin River Rd					203 Concord Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		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			
	Mark		Shaw		AAA Southern New England			
<b>Street Address</b>					<b>Street Address</b>			
6 Brick Pond Dr					110 Royal Little Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Patrick	J.	Shaw		Ehrenkranz Partners L.P.			
<b>Street Address</b>					<b>Street Address</b>			
75 Meeting House Lane					375 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fairfield					New York		NY	10152-0002

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/29/2017		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			
	Peg	B.	Shaw		Law Office of Peg Shaw			
<b>Street Address</b>					<b>Street Address</b>			
2147 O Street NW, Apt 306					2147 O Street NW, Apt 306			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20037

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/18/2017		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			
	Mehan		Sheehan		Tishman Speyer			
<b>Street Address</b>					<b>Street Address</b>			
571 7th St					45 Rockefeller Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					New York		NY	10011

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		2.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	George	N.	Sheffield		Retired			
<b>Street Address</b>					<b>Street Address</b>			
174 W. 43rd St					174 W. 43rd St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Los Angeles					Los Angeles		CA	90037



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	James		Sheffield		Retired		
<b>Street Address</b>					<b>Street Address</b>		
14 Fox Road					14 Fox Road		
<b>City</b>					<b>City</b>		<b>State</b> <b>Zip</b>
West Cornwall					West Cornwall		CT 06796

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Susan		Shelton		Dr. Susan Shelton		
<b>Street Address</b>					<b>Street Address</b>		
14 Davis Rd					20 Davis Rd		
<b>City</b>					<b>City</b>		<b>State</b> <b>Zip</b>
Falmouth					Falmouth		MA 02540

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		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		
	Rosaia	A.	Shepard		Internal Revenue Service		
<b>Street Address</b>					<b>Street Address</b>		
1200 E. 11th St, Apt 307							
<b>City</b>					<b>City</b>		<b>State</b> <b>Zip</b>
Austin					Austin		TX 78702

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/02/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John	P.	Shevlin		Pare Corporation		
<b>Street Address</b>					<b>Street Address</b>		
34 Bishop Dr					8 Blackstone Valley Pl		
<b>City</b>					<b>City</b>		<b>State</b> <b>Zip</b>
Cumberland					Lincoln		RI 02864-3308

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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	P.	Shevlin		Pare Corporation		
<b>Street Address</b>					<b>Street Address</b>		
34 Bishop Dr					8 Blackstone Valley Pl		
<b>City</b>					<b>City</b>		<b>State</b> <b>Zip</b>
Cumberland					Lincoln		RI 02864-3308

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/29/2017		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	P.	Shevlin		Pare Corporation			
<b>Street Address</b>					<b>Street Address</b>			
34 Bishop Dr					8 Blackstone Valley Pl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Lincoln		RI	02865-1145

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Shannon	M.	Shippee		Embrace Home Loans			
<b>Street Address</b>					<b>Street Address</b>			
44 Rose Hill Rd					25 Enterprise Center			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saunderstown					Middletown		RI	02842

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Barbara		Short		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3550 SW Bond Ave					3550 SW Bond Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portland					Portland		OR	97239

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Abbie	H.	Shouse		Retired			
<b>Street Address</b>					<b>Street Address</b>			
400 S. Shade Ave					400 S. Shade Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sarasota					Sarasota		FL	34237

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David		Shrestinian		Bond Brothers, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
76 Woburn St					145 Spring St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Andover					Everett		MA	02149-4517

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	Lynn		Siegel		Walgreens			
<b>Street Address</b>					<b>Street Address</b>			
2403 Kenya St					2235 Parr Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
The Villages					The Villages		FL	32162

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/15/2017		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			
	Alison	M	Siegler		University of Chicago Law School			
<b>Street Address</b>					<b>Street Address</b>			
5715 S. Kenwood Avenue					6020 S. University Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60637

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Anna		Siegler		Retired			
<b>Street Address</b>					<b>Street Address</b>			
5715 S. Kenwood Ave					5715 S. Kenwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chicago					Chicago		IL	60637

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/20/2017		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			
	Lawrence		Signore		Law Offices of Lawrence J. Signore			
<b>Street Address</b>					<b>Street Address</b>			
136 Anoka Ave					128 Dorrance St, #530			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Barrington					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Eric		Sildon		Accenture			
<b>Street Address</b>					<b>Street Address</b>			
5917 10th Rd N					800 North Glebe Rd, Suite 300			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Arlington					Arlington		VA	22203

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Derek		Silva		City of Providence		
<b>Street Address</b>					<b>Street Address</b>		
5 Wilbur Rd					25 Dorrance St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865-5109	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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		
	Jordan	P.	Silva		Regal Interiors, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
100 Evergreen Dr					2137 S. Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Swansea			MA	02777	Fall River	MA	02724-2160

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/31/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul	T.	Silva		Regal Floor Covering		
<b>Street Address</b>					<b>Street Address</b>		
265 Country Hill Dr					2137 S. Main St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Dighton			MA	02764	Fall River	MA	02724-2160

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/10/2017		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		
	Shari		Silverman		Washington State Parks		
<b>Street Address</b>					<b>Street Address</b>		
420 Sherman Ave SW, Apt 204					PO Box 42650		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Olympia			WA	98502	Olympia	WA	98504-2650

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Silvia		Silverman		CV, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
13704 Carlisle Court					416 Hungerford Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Silver Spring			MD	20904	Rockville	MD	20850

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Kathleen	G	Silvestri		Retired			
Street Address					Street Address			
22 Webb St					22 Webb St			
City			State	Zip	City		State	Zip
Providence			RI	02908	Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/24/2017		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			
	Sheila	A.	Simas		Hunter Industries			
Street Address					Street Address			
1940 Diamond St					1940 Diamond St			
City			State	Zip	City		State	Zip
San Marcos			CA	92078	San Marcos		CA	92078

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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			
	Anthony		Simon		Simon Consulting Services			
Street Address					Street Address			
126 Cathedral Ave					126 Cathedral Avenue			
City			State	Zip	City		State	Zip
Providence			RI	02908	Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Anthony		Simon		Simon Consulting Services			
Street Address					Street Address			
126 Cathedral Ave					126 Cathedral Avenue			
City			State	Zip	City		State	Zip
Providence			RI	02908	Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/09/2017		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			
	Georgia		Simpson		Retired			
Street Address					Street Address			
1010 Hygeia Ave					1010 Hygeia Ave			
City			State	Zip	City		State	Zip
Encinitas			CA	92024	Encinitas		CA	92024

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Richard	A.	Sinapi		Sinapi Law Associates		
<b>Street Address</b>					<b>Street Address</b>		
175 Hillside Drive					2374 Post Rd, Ste 201		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02920-5602	Warwick	RI	02886-2270

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/11/2017		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		
	Rosalyn	K	Sinclair		Retired		
<b>Street Address</b>					<b>Street Address</b>		
170 Westminster St, #600					170 Westminster St, #600		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02903-2216	Providence	RI	02903-2216

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/26/2017		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		
	William	S.	Singer		Kirkland & Ellis LLP		
<b>Street Address</b>					<b>Street Address</b>		
300 N LaSalle Dr					300 N LaSalle Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60654	Chicago	IL	60654

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	James	Lynn	Singleton		Providence Performing Arts Center		
<b>Street Address</b>					<b>Street Address</b>		
68 Tarklin Rd					220 Weybosset St.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chepachet			RI	02814-1513	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	John	D.	Sinnott		Gilbane Building		
<b>Street Address</b>					<b>Street Address</b>		
12 Mechanic St					7 Jackson Walkway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Mattapoisett			MA	02739-2605	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	John	D.	Sinnott		Gilbane Building			
<b>Street Address</b>					<b>Street Address</b>			
12 Mechanic St					7 Jackson Walkway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Mattapoisett					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/15/2017		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			
	Carin		Wiley Sinrod		Retired			
<b>Street Address</b>					<b>Street Address</b>			
138 Crescent Rd					138 Crescent Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Corte Madera					Corte Madera		CA	94925

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Jillian		Siqueland		Retired			
<b>Street Address</b>					<b>Street Address</b>			
64 Keene St					64 Keene 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	04/03/2017		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			
	Vivian		Skadron		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
12915 Joelle Rd NE					12915 Joelle Rd NE			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Albuquerque					Albuquerque		NM	87112

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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			
	Ellis		Skinner	Jr.	Unemployed			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 686					PO Box 686			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Waverly					Waverly		TN	37185-0686

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Julie		Skrapits		Retired		
<b>Street Address</b>					<b>Street Address</b>		
431 North Ott Street					431 North Ott Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Allentown			PA	18104	Allentown	PA	18104

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Barbara		Slater		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3322 Amelia Run Way					3322 Amelia Run Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Fort Myers			FL	33917	North Fort Myers	FL	33917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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		
	Marianne		Slaughter		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1656 Riente St					1656 Riente St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Camarillo			CA	93010	Camarillo	CA	93010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Kathleen	M.	Sloane		Brown Harris Stevens Residential Sales, LLC		
<b>Street Address</b>					<b>Street Address</b>		
952 5th Ave, Apt 8C					445 Park Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10075-1749	New York	NY	10022

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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		
	Grace	G.	Smith		Retired		
<b>Street Address</b>					<b>Street Address</b>		
10000 Main St, Unit 802					10000 Main St, Unit 802		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bellevue			WA	98004	Bellevue	WA	98004



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Ruth		Snedic		Retired		
<b>Street Address</b>					<b>Street Address</b>		
9038 W. Orchard St					9038 W. Orchard St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
West Allis			WI	53214	West Allis	WI	53214

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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		
	Karin		Snodgrass		Center Cass School District 66		
<b>Street Address</b>					<b>Street Address</b>		
29W300 Iroquois Ct N					699 Plainfield Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warrenville			IL	60555	Downers Grove	IL	60516

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Joyce	M.	Soliman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
415 W. Prospect St					415 W. Prospect St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lake Mills			WI	53551	Lake Mills	WI	53551

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Marjorie		Solomon		Compass Group		
<b>Street Address</b>					<b>Street Address</b>		
1707 Belle Court					2400 Yorkmont Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lilburn			GA	30047	Charlotte	NC	28217

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	Raymond		Solomon		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1 Bridge Street					1 Bridge Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Irvington			NY	10533	Irvington	NY	10533

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Bamboo		Solzman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5455 S. Hyde Park Blvd.					5455 S. Hyde Park Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60615	Chicago	IL	60615

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Rita	M.	Sova		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2795 US Hwy 52					2795 US Hwy 52		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Minooka			IL	60447	Minooka	IL	60447

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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		Spaziani		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1029 Rider St					1029 Rider St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Iowa City			IA	52246	Iowa City	IA	52246

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Joan		Spero		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
1165 Park Ave, Apt 12C					1165 Park Ave, Apt 12C		
<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
	Check	Individual	05/03/2017		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		
	Robert	J.	Speyer		Tishman Speyer		
<b>Street Address</b>					<b>Street Address</b>		
45 Rockefeller Plaza					45 Rockefeller Plaza		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10111-0100	New York	NY	10111-0100

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/30/2017		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		
	Carol		Splete		Retired		
<b>Street Address</b>					<b>Street Address</b>		
113 Bethel Church Rd					113 Bethel Church Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bidwell			OH	45614	Bidwell	OH	45614

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		
	Peter		Spool		Retired		
<b>Street Address</b>					<b>Street Address</b>		
146 Graham St					146 Graham St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Highland Park			NJ	08904	Highland Park	NJ	08904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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		
	Sharron		St. John		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
22 Shelby Dr					22 Shelby Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Asheville			NC	28803	Asheville	NC	28803

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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		
	Kevin	M.	Stacom		Mudville Pub		
<b>Street Address</b>					<b>Street Address</b>		
32 Banfield Ln					8 W. Marlborough Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Saunderstown			RI	02874-3839	Newport	RI	02840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Amanda		Stapleford		Amanda Stapleford, Artist		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 477					PO Box 477		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Arroyo Seco			NM	87514	Arroyo Seco	NM	87514

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/22/2017		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			
	Sheryl	C.	Starr		Bernkopf Goodman LLP			
<b>Street Address</b>					<b>Street Address</b>			
61 Woodlawn Dr					2 Seaport Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Chestnut Hill					Boston		MA	02210

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/01/2017		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			
	Joanne		Stasiun		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 177								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					RI			02813-0177

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Timothy		Stasiun		Stasiun Companies			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 177					3880 Old Post Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Charlestown					RI			02813-2549

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Ellen		Stearns		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
3920 SW Hilsdale Ave					3920 SW Hilsdale Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portland					Portland		OR	97239

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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			
	Patricia	D.	Steere		Steere Engineering			
<b>Street Address</b>					<b>Street Address</b>			
245 Blackberry Hill Dr					2350 Post, Ste 100			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Kingstown					Warwick		RI	02886-2222

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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				
	Carolyn		Steinhoff		City University of NY				
<b>Street Address</b>					<b>Street Address</b>				
120 Ocean Parkway					217 E. 42nd St				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Brooklyn					New York		NY		10017

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/28/2017		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				
	Cathya	W.	Stephenson		Info Requested				
<b>Street Address</b>					<b>Street Address</b>				
3050 Military Rd NW, Apt 404									
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Washington					DC		02015-1358		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		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				
	Carol		Stevens		Retired				
<b>Street Address</b>					<b>Street Address</b>				
193 Ferne Ave					193 Ferne Ave				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Palo Alto					Palo Alto		CA		94306

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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				
	Jack		Stewart		Sheet Metal Workers Local 17				
<b>Street Address</b>					<b>Street Address</b>				
65 Cohasset Ln					175 Ridge St				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Cranston					Providence		RI		02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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				
	Jack		Stewart		Sheet Metal Workers Local 17				
<b>Street Address</b>					<b>Street Address</b>				
65 Cohasset Ln					175 Ridge St				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Cranston					Providence		RI		02909

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	S. Ross		Stivison		University of California		
<b>Street Address</b>					<b>Street Address</b>		
103 Northcreek Cir					Berkeley		
<b>City</b>					<b>State</b>		<b>Zip</b>
Walnut Creek					CA		94720

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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		Stone		Rhode Island Mayoral Academies		
<b>Street Address</b>					<b>Street Address</b>		
160 Westminster St					160 Westminster St, Suite 202		
<b>City</b>					<b>State</b>		<b>Zip</b>
Providence					RI		02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/14/2017		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		
	Geoffrey		Stone		University of Chicago		
<b>Street Address</b>					<b>Street Address</b>		
1111 E. 60th St					5801 S. Ellis Ave		
<b>City</b>					<b>State</b>		<b>Zip</b>
Chicago					IL		60637

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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	M	Stone		Plymouth Rock Assurance Corporation		
<b>Street Address</b>					<b>Street Address</b>		
12 Lime St					695 Atlantic Ave		
<b>City</b>					<b>State</b>		<b>Zip</b>
Boston					MA		02111

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/01/2017		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	H	Stookey		Retired CEO / Nat'l Distillers & Chemical Co.		
<b>Street Address</b>					<b>Street Address</b>		
535 Egremont Road					PO Box 1279		
<b>City</b>					<b>State</b>		<b>Zip</b>
Sheffield					MA		01257

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Mary		Stoolmiller		Retired		
<b>Street Address</b>					<b>Street Address</b>		
6143 Walker Drive					6143 Walker Drive		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Troy			MI	48085	Troy	MI	48085

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Daniel		Strack		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2927 Sun Cove Dr					2927 Sun Cove Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Kissimmee			FL	34746	Kissimmee	FL	34746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Elizabeth		Strauss		Palmer Trinity School		
<b>Street Address</b>					<b>Street Address</b>		
6886 N. Kendall Dr, D308					8001 SW 184th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Miami			FL	33156	Palmetto Bay	FL	33157

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		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		Strauss		San Diego Mental Health Association		
<b>Street Address</b>					<b>Street Address</b>		
7887 Revelle Drive					4069 30th Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
La Jolla			CA	92037	San Diego	CA	92104

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Ellen	B	Strickler		Retired		
<b>Street Address</b>					<b>Street Address</b>		
133 E 80th St. #14					133 E 80th St. #14		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10075	New York	NY	10075

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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			
	Daniel	B	Strickler	Jr	Beachtree Capitol Partners, Inc			
<b>Street Address</b>					<b>Street Address</b>			
133 East 80th St					41 East 57th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10022

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Jane		Strom		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4901 Andros Drive					4901 Andros Drive			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Tampa					Tampa		FL	33629

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		Stromberg		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 423					PO Box 423			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Round Lake					Round Lake		NY	12151

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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			
	Beatriz		Struck		Retired			
<b>Street Address</b>					<b>Street Address</b>			
177 Ocean Lane Dr					177 Ocean Lane Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Key Biscayne					Key Biscayne		FL	33149

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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		Struck		Wand Partners			
<b>Street Address</b>					<b>Street Address</b>			
177 Ocean Lane Dr					260 Crandon Blvd.			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Key Biscayne					Key Biscayne		FL	33149



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Mary		Dowd Struck		Retired		
<b>Street Address</b>					<b>Street Address</b>		
22 Shadow Farm Way					22 Shadow Farm Way		
<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	05/30/2017		565.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Maryellen		Struck		Retired		
<b>Street Address</b>					<b>Street Address</b>		
7 McMillen Way					7 McMillen Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Narragansett	RI	02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/18/2017		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		
	Mildred	H.	Struck		Retired		
<b>Street Address</b>					<b>Street Address</b>		
21 Homeland Ave					21 Homeland Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Narragansett	RI	02882

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/31/2017		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		
	Robert	E.	Struck		Robert E. Struck Jr & Co.		
<b>Street Address</b>					<b>Street Address</b>		
7 McMillen Way					1250 Smith Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Narragansett			RI	02882	Providence	RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/26/2017		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		
	Carleen		Sturman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
32600 SW Jp West Rd					32600 SW Jp West Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Scappoose			OR	97056	Scappoose	OR	97056

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/11/2017		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			
	Shivan	S.	Subramaniam		FM Global Foundation			
<b>Street Address</b>					<b>Street Address</b>			
155 Grotto Ave					270 Central Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Johnston		RI	02919

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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			
	Lloyd	B.	Sugarman		Johnny Rockets			
<b>Street Address</b>					<b>Street Address</b>			
115A Pratt St					443 South Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Philadelphia		PA	19147

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Donata		Sugden		University of Wisconsin			
<b>Street Address</b>					<b>Street Address</b>			
155 Lakewood Blvd.					702 West Johnston St, Suite 1101			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Madison					Madison		WI	53715-1007

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/16/2017		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			
	Daniel		Sullivan		Collette Vacations			
<b>Street Address</b>					<b>Street Address</b>			
16 Garwaine Drive					162 Middle Street			
<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	04/01/2017		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			
	Heidi		Sullivan		PCL Alberno			
<b>Street Address</b>					<b>Street Address</b>			
409 W. Joliet Hwy					2434 Interstate Plaza Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New Lenox					Hammond		IN	46324

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	James		Sullivan		Hollingsworth LLP		
<b>Street Address</b>					<b>Street Address</b>		
2119 Derby Ridge Lane					1350 I Street NW		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Silver Spring			MD	20910-2653	Washington	DC	20005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/16/2017		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		
	Kathleen		Sullivan		Collette Vacations		
<b>Street Address</b>					<b>Street Address</b>		
16 Garwaine Dr					162 Middle St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Pawtucket	RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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	G.	Sullivan		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
1404 Gardners Neck Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Swansea			MA	02777			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Marilyn		Sulzbacker		Marilyn Sulzbacker, LCSW		
<b>Street Address</b>					<b>Street Address</b>		
165 W. 66 St., #3E					165 W. 66 St., #3E		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023	New York	NY	10023

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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		
	Margaret		Swan		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2250 Ridgeway Dr					2250 Ridgeway Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Eugene			OR	97401	Eugene	OR	97401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/02/2017		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			
	Sheila		Sweeney		Massachusetts Academy of Trial Attorneys			
Street Address					Street Address			
24 Sullivan St					20 Burlington Mall Road, Suite 230			
City			State	Zip	City		State	Zip
Charlestown			MA	02129	Burlington		MA	01803

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Donald	R	Sweitzer		GTech			
Street Address					Street Address			
250 Major Potter Rd					10 Memorial Blvd			
City			State	Zip	City		State	Zip
Warwick			RI	02886	Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Sheri	L	Sweitzer		Homemaker			
Street Address					Street Address			
250 Major Potter Rd					250 Major Potter Rd			
City			State	Zip	City		State	Zip
Warwick			RI	02886	Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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			
	Dale		Swinney		Retired			
Street Address					Street Address			
701 W. Herbert Ave					701 W. Herbert Ave			
City			State	Zip	City		State	Zip
Reedley			CA	93654	Reedley		CA	93654

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Stephanie	B.	Swire		Retired			
Street Address					Street Address			
29 Hickory Dr					29 Hickory Dr			
City			State	Zip	City		State	Zip
Slingerland			NY	12159	Slingerland		NY	12159

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/29/2017		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		
	Eric		Szczepkowski		Coast Realty		
<b>Street Address</b>					<b>Street Address</b>		
16 Great Cedar Crossing					1 Realty Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lakeville			MA	02347-2276	East Providence	RI	02914

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/05/2017		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		Taft		Yankee Development Corp		
<b>Street Address</b>					<b>Street Address</b>		
103 Church Street					1 Christies Landing		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Newport			RI	02840	Newport	RI	02840

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/07/2017		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		
	Judith	P	Tallo		State of RI - JCLS		
<b>Street Address</b>					<b>Street Address</b>		
23 Jenna Way					One Captiol Hill		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cumberland			RI	02864-3278	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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		
	Jean		Taylor		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
2025 Broadway, Apt 30D					2025 Broadway, Apt 30D		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10023	New York	NY	10023

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/23/2017		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		
	Jeffrey	M.	Taylor		Advovacy Solutions LLC		
<b>Street Address</b>					<b>Street Address</b>		
18 Squantum Dr					4 Richmond Sq		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Warwick			RI	02888-5318	Providence	RI	02906

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Christopher		Teague		Boston College			
<b>Street Address</b>					<b>Street Address</b>			
78 Hastings St					140 Commonwealth Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Framingham					Chestnut Hil		MA	02467

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/12/2017		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			
	Akira		Templeton		Oregon Primary Care Association			
<b>Street Address</b>					<b>Street Address</b>			
2143 Northeast Weidler St					310 SW 4th Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portland					Portland		OR	97204

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/25/2017		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			
	Donald	E.	Tencher		Rhode Island College			
<b>Street Address</b>					<b>Street Address</b>			
484 Succotash Rd					600 Mt. Pleasant Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
South Kingstown					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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			
	Cindy	G.	Terbecki		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
99 Mosle Road					99 Mosle Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Far Hills					Far Hills		NJ	07931

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	Melanie		Terrill		Retired			
<b>Street Address</b>					<b>Street Address</b>			
450 S. 8th St					450 S. 8th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Salina					Salina		KS	67401

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Lawrence		Tetenbaum		Petro Home Services			
<b>Street Address</b>					<b>Street Address</b>			
38 Summit Ct					3 Fairchild Ct			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Plainview					Plainview		NY	11803

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Anita		Thacher		Self-Employed Artist			
<b>Street Address</b>					<b>Street Address</b>			
33 Second Ave, #2B					33 Second Ave, #2B			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10003

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/10/2017		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			
	Carroll	J.	Thomas		Retired			
<b>Street Address</b>					<b>Street Address</b>			
115 La Senda Road					115 La Senda Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Los Alamos					Los Alamos		NM	87544

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/14/2017		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			
	Herbert		Thomas		Retired			
<b>Street Address</b>					<b>Street Address</b>			
438 Vista Ct					438 Vista Ct			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Livermore					Livermore		CA	94550

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Rick		Thomas		Alamo Heights Independent School District			
<b>Street Address</b>					<b>Street Address</b>			
433 E Olmos Dr, #A					7101 Broadway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Antonio					San Antonio		TX	78209

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/05/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Corey		Thompson		Retired			
<b>Street Address</b>					<b>Street Address</b>			
231 Meadowridge Dr					231 Meadowridge Dr			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Warner Robins					Warner Robins		GA 31093	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/22/2017		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			
	Richard		Thompson		University of Rhode Island			
<b>Street Address</b>					<b>Street Address</b>			
14 Benefit St					Coastal Institute Building, 2nd Floor, Room 206			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Providence					Kingston		RI 02881-2020	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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			
	Daniel		Tierney		Wicklow Capital, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
737 N. Michigan ve					53 Jackson Blvd.			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
Chicago					Chicago		IL 60604	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Mary	Ann	Tighe		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
988 Fifth Ave					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
New York					New York		NY 10166	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/23/2017		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			
	Jonathan	M.	Tisch		Loews Hotels			
<b>Street Address</b>					<b>Street Address</b>			
667 Madison Ave, 11th Fl					667 Madison Ave, 11th Fl			
<b>City</b>					<b>City</b>		<b>State Zip</b>	
New York					New York		NY 10065-8068	



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/26/2017		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			
	John		Tocci		Tocci Building Corp.			
<b>Street Address</b>					<b>Street Address</b>			
4 Solomon Pierce Rd					660 Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lexington					Woburn		MA	01801-8407

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/26/2017		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			
	Lila		Tocci		Tocci Building Corp.			
<b>Street Address</b>					<b>Street Address</b>			
4 Solomon Pierce Rd					660 Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lexington					Woburn		MA	01801-8407

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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			
	Christopher		Todd		Kronos, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
1199 Monument St					297 Billerica Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Concord					Chelmsford		MA	01824-4119

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/28/2017		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			
	Irene		Todd		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
1199 Monument St					1199 Monument St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Concord					Concord		MA	01742-5300

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Kathleen		Todd		ShadowFox Illuminations Creative Arts			
<b>Street Address</b>					<b>Street Address</b>			
3660 35th Ave South					3660 35th Ave South			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Minneapolis					Minneapolis		MN	55406

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Stephanie		Tombrello		Safety Belt Safe USA		
<b>Street Address</b>					<b>Street Address</b>		
Box 553					1124 W. Carson St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Altadena			CA	91003	Torrance	CA	90502

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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		
	Stephanie		Tombrello		Safety Belt Safe USA		
<b>Street Address</b>					<b>Street Address</b>		
Box 553					1124 W. Carson St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Altadena			CA	91003	Torrance	CA	90502

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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		
	Nancy	C>	Tooman		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
501 Cambridge Rd					501 Cambridge Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lake Bluff			IL	60044	Lake Bluff	IL	60044

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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		
	Angelina		Torregrossa		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
19 Chestnut Street					19 Chestnut Street		
<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	05/08/2017		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		
	Anne Marie		Torregrossa		Info Requested		
<b>Street Address</b>					<b>Street Address</b>		
40 West River Parkway							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Providence			RI	02904			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Michael		Torregrossa		CCRI			
<b>Street Address</b>					<b>Street Address</b>			
19 Chestnut Street					400 East Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/05/2017		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			
	Nick		Torregrossa		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
40 West River Pkwy								
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					RI			02904-3431

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/08/2017		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			
	Salvatore		Torregrossa		Tower Construction Corp.			
<b>Street Address</b>					<b>Street Address</b>			
40 West River Parkway					140 Comstock Parkway Unit 3			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
North Providence					Cranston		RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Vita		Marie Torres		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3 Robertson Dr					3 Robertson Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Gilford					Gilford		NH	03249

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/17/2017		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			
	Gregory	A.	Tosko		CBRE			
<b>Street Address</b>					<b>Street Address</b>			
150 East 61st St, Apt 16D					200 Park Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10166-0005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	William		Tracey		TRAC Builders, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
28 S. Angell St					28 Wolcott Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02908

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David		Tracy		Hinckley Allen & Snyder			
<b>Street Address</b>					<b>Street Address</b>			
29 Suffolk Way					50 Kennedy Plaza			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Rebecca		Tracy		Retired			
<b>Street Address</b>					<b>Street Address</b>			
2611 Derby St					2611 Derby St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Berkeley					Berkeley		CA	94705

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Alice		Trexler		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
48 Spy Pond Lane					48 Spy Pond Lane			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Arlington					Arlington		MA	02474

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	William	J.	Trezvant		State of RI/Special Assistant to Attorney General			
<b>Street Address</b>					<b>Street Address</b>			
98 Ethel Drive					150 South Main Street			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portsmouth					Providence		RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Russell		Trimble		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1008 W. Walkup Ave					1008 W. Walkup Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Carbondale			IL	62901	Carbondale	IL	62901

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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		
	Joel	P.	Trojan		Century Drywall		
<b>Street Address</b>					<b>Street Address</b>		
10 Payne Road					1988 Old Louisquisset Pike		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Barrington			RI	02806-4008	Lincoln	RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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		
	Thomas	N.	Tryforos		Grand Street Capital		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 4726					1005 Main St, Unit 1206		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916	Pawtucket	RI	02860-7804

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/11/2017		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		
	Mary		Turner		Retired		
<b>Street Address</b>					<b>Street Address</b>		
945 Lawton St					945 Lawton St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
San Francisco			CA	94122	San Francisco	CA	94122

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/15/2017		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		
	Kayla	A.	Tutsch		G. Lopes Construction, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
1211 Center St					565 Winthrop St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Dighton			MA	02715	Taunton	MA	02780

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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			
	Dean	H.	Tyler		WT Development LLC			
<b>Street Address</b>					<b>Street Address</b>			
310 Coffee Pot Riviera NE					2334 1st Ave N			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saint Petersburg					St. Petersburg		FL	33713-8819

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Andrew		Tyska		Bristol Marine			
<b>Street Address</b>					<b>Street Address</b>			
26 Patricia Ann Drive					99 Poppasquash Road, #1			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bristol					Bristol		RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Elizabeth		Ungar		Elizabeth Ungar, Self-Employed Freelancer			
<b>Street Address</b>					<b>Street Address</b>			
272 W. 107th St					272 W. 107th St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
New York					New York		NY	10025-7833

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Barbara	A.	Vachon		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1855 Winding Oaks Way					1855 Winding Oaks Way			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Naples					Naples		FL	34109-1460

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		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			
	Suzanne		Valencia		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
410 Lemon Grove Avenue					410 Lemon Grove Avenue			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
West Melbourne					West Melbourne		FL	32904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	James		Vallejos		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2044 Havana St					2044 Havana St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Aurora			CO	80010	Aurora	CO	80010

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/04/2017		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		
	Marcel	A.	Valois		American Council of Engineering Companies of Rhode Island		
<b>Street Address</b>					<b>Street Address</b>		
105 Dean Ridge Court					243 North Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02920	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		12.50

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Philip		Van Itallie		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
17 Croft Rd					17 Croft Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Poughkeepsie			NY	12603	Poughkeepsie	NY	12603

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Sandra		VanDehey		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
4927 Juniper Way					4927 Juniper Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Golden			CO	80403	Golden	CO	80403

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Ava		Vanech		The Learning Community Charter School		
<b>Street Address</b>					<b>Street Address</b>		
29 Lincoln Ave					21 Lincoln Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906-5707	Central Falls	RI	02863

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/10/2017		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		
	Linna		VanNette		United Healthcare		
<b>Street Address</b>					<b>Street Address</b>		
141 Duncan Trail					10151 Deerwood Park		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Longwood			FL	32779	Jacksonville	FL	32256

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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		
	Christine	A.	Varney		Cravath, Swaine & Moore LLP		
<b>Street Address</b>					<b>Street Address</b>		
257 Central Park West, Apt 8A					825 Eighth Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10024	New York	NY	10019-7475

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		3.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Tom		Vasicek		Gila Therapeutics, Inc.		
<b>Street Address</b>					<b>Street Address</b>		
1712 Humboldt Ave S					1712 Humboldt Ave S		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Minneapolis			MN	55403-2809	Minneapolis	MN	55403-2809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Melba		Vasquez		Melba Vasquez, Clinical Psychologist		
<b>Street Address</b>					<b>Street Address</b>		
2713 Bartons Bluff Lane					2901 Bee Cave Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Austin			TX	78746	Austin	TX	78746

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/07/2017		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		
	Teri		Vershel		Teru Vershel, Self-Employed Photographer		
<b>Street Address</b>					<b>Street Address</b>		
381 Guinda St					381 Guinda St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Palo Alto			CA	94301	Palo Alto	CA	94301



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/12/2017		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				
	Millicent		Vetterlein		Info Requested				
<b>Street Address</b>					<b>Street Address</b>				
PO Box 366									
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Deer Harbor					WA		98243		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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				
	Anthony	J	Victoria		Auto Service Auto Body				
<b>Street Address</b>					<b>Street Address</b>				
171 Chimney Rock Drive					165 Frenchtown Road				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
North Kingstown					RI		02852		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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				
	Karen	H.	Vierneisel		Self-Employed Artist				
<b>Street Address</b>					<b>Street Address</b>				
5360 N. Lowell Ave, Apt 504					5360 N. Lowell Ave, Apt 504				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Chicago					IL		60630		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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				
	Suzanne		Villar		Homemaker				
<b>Street Address</b>					<b>Street Address</b>				
17130 Bridgeton Lane					17130 Bridgeton Lane				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
Huntersville					NC		28078		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/09/2017		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				
	Robert		Vincent		GTECH				
<b>Street Address</b>					<b>Street Address</b>				
125 Summit View Ln					10 Memorial Blvd				
<b>City</b>					<b>City</b>		<b>State</b>		<b>Zip</b>
North Kingstown					RI		02852		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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			
	John	A.	Vitale		Warehouse 5			
<b>Street Address</b>					<b>Street Address</b>			
1223 Park Ave E					50 Waterfront Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Atlantic Beach					Island Park		NY	11558

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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			
	Kevin	L.	Viveiros		Pare Corporation			
<b>Street Address</b>					<b>Street Address</b>			
105 Gold Mine Rd					8 Blackstone Valley Pl			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Cumberland					Lincoln		RI	02865-1145

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/10/2017		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			
	Steven	J.	Volante		Volante's Service Station			
<b>Street Address</b>					<b>Street Address</b>			
60 Blaine St					14 Ainsworth St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	MKT		Voyvodick		Voyvodick & Associates			
<b>Street Address</b>					<b>Street Address</b>			
1836 9th Avenue					1836 9th Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94122

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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			
	James	D.	Wagner		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4897 E. Walnut St					4897 E. Walnut St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Westerville					Westerville		OH	43081

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/05/2017		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			
	Jed		Walentas		Two Trees Management			
<b>Street Address</b>					<b>Street Address</b>			
45 Main St, #602					45 Main St, #602			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn			NY	11201-1000	Brooklyn		NY	11201-1000

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/02/2017		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			
	George	H.	Walker		Info Requested			
<b>Street Address</b>					<b>Street Address</b>			
1050 17th St NW, Suite #1200								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Washington			DC	20036				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Jerry	A.	Walker		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3800 Wild Turkey Dr					3800 Wild Turkey Dr			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Shingle Springs			CA	95682	Shingle Springs		CA	95682

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/25/2017		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		Wallace		U.S. Post Office			
<b>Street Address</b>					<b>Street Address</b>			
1209 West Norwalk Road					230 W 200 S			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Salt Lake City			UT	84123	Salt Lake City		UT	84123

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David		Walsh		Pawtucket Hot Mix			
<b>Street Address</b>					<b>Street Address</b>			
38 Equestrian Ln					25 Concord St			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
East Falmouth			MA	02536-7902	Pawtucket		RI	02860

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/12/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	W.	Walsh		Government Strategies			
<b>Street Address</b>					<b>Street Address</b>			
26 Crawford Ave					335 Centerville Rd, Bldg 4			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02886-4384

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/08/2017		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			
	William	G	Walsh		William G Walsh, Esq.			
<b>Street Address</b>					<b>Street Address</b>			
26 Crawford Ave					26 Crawford Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Warwick					Warwick		RI	02889

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	T	Wanat		Vanasse Hangen Brustlin, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
20 Germain St					1 Cedar St, Suite 400			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Worcester					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/07/2017		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			
	Claire	A.	Wanebo		Retired			
<b>Street Address</b>					<b>Street Address</b>			
116 Poppasquash Road					116 Poppasquash Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bristol					Bristol		RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Claire	A.	Wanebo		Retired			
<b>Street Address</b>					<b>Street Address</b>			
116 Poppasquash Road					116 Poppasquash Road			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bristol					Bristol		RI	02809

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Patrick	M.	Ward		Columbia Financial Management		
<b>Street Address</b>					<b>Street Address</b>		
55 Pocasset Ave					10 Memorial Blvd.		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02909	Providence	RI	02903-1160

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Renate		Wasserman		Retired		
<b>Street Address</b>					<b>Street Address</b>		
5863 N. Golden Eagle Dr					5863 N. Golden Eagle Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Tucson			AZ	85750	Tucson	AZ	85750

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		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		
	Bruce		Waterson		Waterson Terminal Services LLC		
<b>Street Address</b>					<b>Street Address</b>		
16 Highpoint Drive					35 Terminal Road		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
North Smithfield			RI	02896	Providence	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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		
	Andrea		Watson		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
90 Winward Ln					90 Winward Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809-1551	Bristol	RI	02809-1551

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/30/2017		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		
	Andrea		Watson		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
90 Winward Ln					90 Winward Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809-1551	Bristol	RI	02809-1551

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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		
	Andrea		Watson		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
90 Winward Ln					90 Winward Ln		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bristol			RI	02809-1551	Bristol	RI	02809-1551

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Pamela		Wax		Westchester Jewish COMMunity Services		
<b>Street Address</b>					<b>Street Address</b>		
679 W. 239th St					845 North Broadway		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bronx			NY	10463	White Plains	NY	10603

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Gale		Wayman		Self-Employed Building Contractor		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 1060					PO Box 1060		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Island Heights			NJ	08732	Island Heights	NJ	08732

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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		
	Robin	P.	Weber		AT&T		
<b>Street Address</b>					<b>Street Address</b>		
3901 Independence Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Bronx			NY	10463			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/20/2017		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		Weber-Levine		Retired		
<b>Street Address</b>					<b>Street Address</b>		
373 Sargent Dr, SE					373 Sargent Dr, SE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Atlanta			GA	30315-7417	Atlanta	GA	30315-7417

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/22/2017		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		
	Carl		Weinberg		Carl Weinberg & Co. LLP		
<b>Street Address</b>					<b>Street Address</b>		
100 Beechwood Dr					300 Centerville Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921	Warwick	RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/19/2017		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		
	Jeffrey		Weiss		DLC		
<b>Street Address</b>					<b>Street Address</b>		
8 Whitney Drive					127 Kearney Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Cranston	RI	02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/04/2017		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		
	Miriam		Weizenbaum		DeLuca and Weizenbaum, Ltd.		
<b>Street Address</b>					<b>Street Address</b>		
65 Weymouth St					199 North Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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		
	Miriam		Weizenbaum		DeLuca and Weizenbaum, Ltd.		
<b>Street Address</b>					<b>Street Address</b>		
65 Weymouth St					199 North Main Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02906	Providence	RI	02905

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Rosalyn	E.	Weller		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2318 Eagleview Circle					2318 Eagleview Circle		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Longmont			CO	80504	Longmont	CO	80504

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/08/2017		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		
	Gail		Wells		Retired		
<b>Street Address</b>					<b>Street Address</b>		
4983 Delos Way					4983 Delos Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Oceanside			CA	92075-7409	Oceanside	CA	92075-7409

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Robert		Wells		Retired		
<b>Street Address</b>					<b>Street Address</b>		
400 Broken Arrow Rd					400 Broken Arrow Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Roswell			NM	88201	Roswell	NM	88201

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Janice		Wenzel		Retired		
<b>Street Address</b>					<b>Street Address</b>		
95R Maple Ave					95R Maple Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Durham			CT	06422	Durham	CT	06422

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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		
	Lucy		West		Retired		
<b>Street Address</b>					<b>Street Address</b>		
165 Park Row					165 Park Row		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10038	New York	NY	10038

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/23/2017		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		
	Wayne		Whalen		Skadden, Arps, Slate, Meagher & Flom LLP		
<b>Street Address</b>					<b>Street Address</b>		
4920 S. Greenwood Avenue					155 N. Wacker Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chicago			IL	60615	Chicago	IL	60606



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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			
	Jane		Wheeler		Retired			
<b>Street Address</b>					<b>Street Address</b>			
15 Hamilton Rd					15 Hamilton Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Hopewell Junction					Hopewell Junction		NY	12533

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Willard	T.	Wheeler		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1139 Mountain Gate Rd					1139 Mountain Gate Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Upland					Upland		CA	91786

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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			
	Charles		White		Retired			
<b>Street Address</b>					<b>Street Address</b>			
75 Cliff Drive					75 Cliff Drive			
<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	04/24/2017		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			
	Clara	A.	White		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 660083					PO Box 660083			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Miami Springs					Miami Springs		FL	33266

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/19/2017		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			
	Darren	P.	White		Purlife			
<b>Street Address</b>					<b>Street Address</b>			
5619 Vulcan Vista Dr NE					3821 Menaul Blvd NE, Suite F			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Albuquerque					Albuquerque		NM	87110

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/03/2017		50.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Patricia		White		Unemployed		
<b>Street Address</b>					<b>Street Address</b>		
609 Encino Place NE					609 Encino Place NE		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Albuquerque			NM	87102	Albuquerque	NM	87102

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		1,000.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Raymond	S.	White		Retired		
<b>Street Address</b>					<b>Street Address</b>		
27 Raven Circle					27 Raven Circle		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Cranston			RI	02921-3557	Cranston	RI	02921

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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		
	Christopher	c.	Whitney		Little, Medeiros, Kinder, Bulman & Whitney		
<b>Street Address</b>					<b>Street Address</b>		
1131 Carrs Pond Rd					72 Pine Street		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818-1010	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/23/2017		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		
	Laura	A.	Whitney		Wisconsin State Assembly Sergeant at Arms		
<b>Street Address</b>					<b>Street Address</b>		
4322 Melody Ln, Apt 211					411 West, State Capitol		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Madison			WI	53704	Madison	WI	53708-8952

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Rachel		Wickersham		Homemaker		
<b>Street Address</b>					<b>Street Address</b>		
901 E. Krage Dr					901 E. Krage Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Addison			IL	60101	Addison	IL	60101

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Anne		Wieland		Retired		
<b>Street Address</b>					<b>Street Address</b>		
PO Box 15294					PO Box 15294		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Fritz Creek			AK	99603	Fritz Creek	AK	99603

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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		
	Gail		Wiemann		City of Oakland Public Library		
<b>Street Address</b>					<b>Street Address</b>		
426 30th St					125 14th St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Richmond			CA	94804	Oakland	CA	94612

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Carolyn		Wiener		Retired		
<b>Street Address</b>					<b>Street Address</b>		
66 Vista Dr					66 Vista Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwich			CT	06830-7128	Greenwich	CT	06830-7128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/09/2017		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		
	Elizabeth		Wiener		Student		
<b>Street Address</b>					<b>Street Address</b>		
66 Vista Dr					66 Vista Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Greenwich			CT	06830-7128	Greenwich	CT	06830-7128

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/06/2017		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		
	Karla		Wight		League of Women Voters Maine		
<b>Street Address</b>					<b>Street Address</b>		
64 Mugwhy Lane					335 Water St		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Portland			ME	04103	Augusta	ME	04330

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/21/2017		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		
	David		Wilcox		Retired		
<b>Street Address</b>					<b>Street Address</b>		
1440 W. Shullenbarger Dr					1440 W. Shullenbarger Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Flagstaff			AZ	86005	Flagstaff	AZ	86005

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/19/2017		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		
	Gerald	T.	Wilds		Retired		
<b>Street Address</b>					<b>Street Address</b>		
2935 Groves Dr					2935 Groves Dr		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Sterling Heights			MI	48310	Sterling Heights	MI	48310

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/04/2017		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		Wilkins		Retired		
<b>Street Address</b>					<b>Street Address</b>		
38 Ives Rd					38 Ives Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
East Greenwich			RI	02818-4819	East Greenwich	RI	02818-4819

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/01/2017		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		
	Suellen		Willi		Willi Associates		
<b>Street Address</b>					<b>Street Address</b>		
17200 N. Applegate Rd					2576 New Hope Rd		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Grants Pass			OR	97527	Grants Pass	OR	97527

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		Williams		Milbank, Tweed, Hadley & McCloy LLP		
<b>Street Address</b>					<b>Street Address</b>		
35 E. 84th St					1221 Avenue of the Americas		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
New York			NY	10028-0871	New York	NY	10020-1001

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/12/2017		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		
	Louise	G.	Williams		Retired		
<b>Street Address</b>					<b>Street Address</b>		
750 Weaver Dairy Rd, Apt 239					750 Weaver Dairy Rd, Apt 239		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Chapel Hill			NC	27514	Chapel Hill	NC	27514

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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		
	Angene	A.	Wilson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
3424 Keithshire Way					3424 Keithshire Way		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Lexington			KY	40503	Lexington	KY	40503

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		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		
	Douglas		Wilson		Broadrock Renewables		
<b>Street Address</b>					<b>Street Address</b>		
312 Highland Ave					120 White Plains Road, 610		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Ridgewood			NJ	07450-4006	Tarrytown	NY	10591

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/04/2017		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		
	Steve		Wilson		Retired		
<b>Street Address</b>					<b>Street Address</b>		
417 31st Ave					417 31st Ave		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Seattle			WA	98122	Seattle	WA	98122

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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		
	Don	E.	Wineberg		Chace, Rutenberg & Freedman, LLP		
<b>Street Address</b>					<b>Street Address</b>		
354 Beavertail Rd					One Park Row		
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Jamestown			RI	02835	Providence	RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	05/17/2017		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			
	Joel		Wishkovsky		Simple Contacts, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
71 Scholes St					309 W. 19th St, #21			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Brooklyn					New York		NY	10011

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/17/2017		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			
	Karen	C.	Witme-Gow		Self-Employed Author			
<b>Street Address</b>					<b>Street Address</b>			
8729 Grants Log Cabin Ln					8729 Grants Log Cabin Ln			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Saint Louis					Saint Louis		MO	63123

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Gayle	J	Wolf		Government Strategies, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
9 King Phillip Rd					335 Centerville Road, Building 4			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Narragansett					Warwick		RI	02886

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/01/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	David	A	Wollin		Hinckley Allen & Snyder LLP			
<b>Street Address</b>					<b>Street Address</b>			
6 Remy Place					100 Westminster St, Suite 1500			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
East Greenwich					Providence		RI	02903

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Eric		Wolman		Retired			
<b>Street Address</b>					<b>Street Address</b>			
3050 Military Rd NW, Apt 2103					3050 Military Rd NW, Apt 2103			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Washington					Washington		DC	20015

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	James	K.	Wong		Not Employed			
<b>Street Address</b>					<b>Street Address</b>			
250 Brentwood Ave					250 Brentwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94127

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/11/2017		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			
	Warren	M	Wood	II	Southcoast Health			
<b>Street Address</b>					<b>Street Address</b>			
435 Water St					101 Page St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Portsmouth					New Bedford		MA	02740

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/31/2017		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			
	Kay		Woodruff		Retired			
<b>Street Address</b>					<b>Street Address</b>			
117 Morning Mist Rd					117 Morning Mist Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fletcher					Fletcher		NC	28732

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/05/2017		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			
	JoAnne		Wright		Retired			
<b>Street Address</b>					<b>Street Address</b>			
821 N. Foreman St, Apt 118					821 N. Foreman St, Apt 118			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Vinita					Vinita		OK	74301

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/02/2017		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			
	Jonathan		Wright		Wright Builders, Inc.			
<b>Street Address</b>					<b>Street Address</b>			
91 Orlander Dr					48 Bates St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Northampton					Northampton		MA	01060

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/22/2017		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			
	Melinda		Wright		Retired			
<b>Street Address</b>					<b>Street Address</b>			
PO Box 225					PO Box 225			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Groveland			CA	95321	Groveland		CA	95321

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/13/2017		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			
	Nancy		Wright		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
8 Mason Place					8 Mason Place			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Foxboro			MA	02035	Foxboro		MA	02035

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/27/2017		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			
	Fujiko		Yamashita		Retired			
<b>Street Address</b>					<b>Street Address</b>			
13600 Marina Pointe Dr, Unit 1007					13600 Marina Pointe Dr, Unit 1007			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Marina Del Rey			CA	90292	Marina Del Rey		CA	90292

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Carol		Young		Homemaker			
<b>Street Address</b>					<b>Street Address</b>			
3 Sylvia Lane					3 Sylvia Lane			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Lincoln			RI	02865	Lincoln		RI	02865

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/19/2017		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			
	Loretta	L.	Young		Retired			
<b>Street Address</b>					<b>Street Address</b>			
34 Wadsworth Ter					34 Wadsworth Ter			
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Cranford			NJ	07016	Cranford		NJ	07016



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/02/2017		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		Yu		Vision Decision			
<b>Street Address</b>					<b>Street Address</b>			
17503 56th Ave					40 Atlantic Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Fresh Meadows					Oceanside		NY	11572

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/09/2017		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			
	Frederick	B.	Zalcman		DONG Energy Wind Power US			
<b>Street Address</b>					<b>Street Address</b>			
16 Windaway Rd					100 Oliver St, Ste 2610			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Bethel					Boston		MA	02110-2602

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/03/2017		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			
	Linda	A	Zanni		Jewish Family Services			
<b>Street Address</b>					<b>Street Address</b>			
15 Cambridge Circle					959 N Main St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Smithfield					Providence		RI	02904

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	05/01/2017		71.42

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Carolyn	R.	Zaroff		Carolyn Zaroff, Self-Employed Impressionist			
<b>Street Address</b>					<b>Street Address</b>			
433 Bridgeway					433 Bridgeway			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sausalito					Sausalito		CA	94965-2207

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/06/2017		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			
	Mary	T.	Zeis		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1193 Saxonburg Blvd					1193 Saxonburg Blvd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Glenshaw					Glenshaw		PA	15116

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/30/2017		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			
	Cecily		Ziegler		Dorcas International Institute			
<b>Street Address</b>					<b>Street Address</b>			
173 Brown St					645 Elmwood Ave			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Providence					Providence		RI	02907

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	04/07/2017		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			
	T.		Zimmerman		Retired			
<b>Street Address</b>					<b>Street Address</b>			
1450 Jefferson St					1450 Jefferson St			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
San Francisco					San Francisco		CA	94123

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/07/2017		25.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Patricia	J.	Zimmermann		Retired			
<b>Street Address</b>					<b>Street Address</b>			
27250 Murrieta Rd					27250 Murrieta Rd			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Sun City					Sun City		CA	92586

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/27/2017		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			
	Lucy		Zodda		Retired			
<b>Street Address</b>					<b>Street Address</b>			
46 Rotary Dr					346 Rotary Dr			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
Johnston					Johnston		RI	02919-4917

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	04/03/2017		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			
	Suzanne	T.	Zorn		Retired			
<b>Street Address</b>					<b>Street Address</b>			
4567 W. Pine Blvd, Apt 226					4567 W. Pine Blvd, Apt 226			
<b>City</b>					<b>City</b>		<b>State</b>	<b>Zip</b>
St. Louis					St. Louis		MO	63108

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/05/2017		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		
	Eric	N.	Zuena		ZDS, Inc.		
Street Address					Street Address		
222 Glen Hills Dr					100 Dorrance St., Unit 20		
City		State	Zip	City		State	Zip
Cranston		RI	02920-3517	Providence		RI	02903-2877

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	06/02/2017		128.26

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
Street Address					Street Address		
P.O Box 9488							
City		State	Zip	City		State	Zip
Providence		RI	02940				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	05/31/2017		0.01

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
Street Address					Street Address		
P.O Box 9488							
City		State	Zip	City		State	Zip
Providence		RI	02940				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	05/02/2017		372.09

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
Street Address					Street Address		
P.O Box 9488							
City		State	Zip	City		State	Zip
Providence		RI	02940				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	04/30/2017		0.01

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
Street Address					Street Address		
P.O Box 9488							
City		State	Zip	City		State	Zip
Providence		RI	02940				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	06/30/2017		0.01

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
<b>Street Address</b>					<b>Street Address</b>		
P.O Box 9488							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02940			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	06/30/2017		124.15

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Bank RI				
<b>Street Address</b>					<b>Street Address</b>		
P.O Box 9488							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Providence			RI	02940			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	06/30/2017		207.78

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Sovereign Bank				
<b>Street Address</b>					<b>Street Address</b>		
255 Newport Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	04/30/2017		193.77

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Sovereign Bank				
<b>Street Address</b>					<b>Street Address</b>		
255 Newport Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	05/31/2017		228.46

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			Sovereign Bank				
<b>Street Address</b>					<b>Street Address</b>		
255 Newport Ave							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
Rumford			RI	02916			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/26/2017		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		
			AMERICAN ASSOCIATION OF UNIVERSITY PF				
<b>Street Address</b>					<b>Street Address</b>		
302 ROOSEVELT HALL, URI							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
KINGSTON			RI	02881			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/31/2017		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		
			AMICA / RI PAC				
<b>Street Address</b>					<b>Street Address</b>		
100 AMICA WAY							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
LINCOLN			RI	02865			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/10/2017		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		
			ATTORNEYS PARTRIDGE SNOW & HAHN (PS&				
<b>Street Address</b>					<b>Street Address</b>		
40 WESTMINSTER STREET SUITE 1100							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
PROVIDENCE			RI	02903			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	06/08/2017		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		
			BUILDING INDUSTRY PAC				
<b>Street Address</b>					<b>Street Address</b>		
450 VETERANS MEMORIAL							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
EAST PROVIDENCE			RI	02914			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/12/2017		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		
			CIRI PAC (Construction Industries of RI)				
<b>Street Address</b>					<b>Street Address</b>		
615 JEFFERSON BOULEVARD							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
WARWICK			RI	02886			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/09/2017		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	
			DELTA DENTAL OF RI PAC			
<b>Street Address</b>					<b>Street Address</b>	
10 CHARLES STREET						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
PROVIDENCE			RI	02904		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/10/2017		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	
			ELEVATOR CONSTRUCTOR LOCAL 39 PAC			
<b>Street Address</b>					<b>Street Address</b>	
65 FRIGATE STREET						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
JAMESTOWN			RI	02835		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	06/05/2017		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	
			HARI PAC (Hospital Association of RI)			
<b>Street Address</b>					<b>Street Address</b>	
405 PROMENADE STREET STE C						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
PROVIDENCE			RI	02908		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	06/12/2017		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	
			HINCKLEY ALLEN & SNYDER PAC			
<b>Street Address</b>					<b>Street Address</b>	
100 WESTMINSTER ST SUITE 1500						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
PROVIDENCE			RI	02903		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	06/07/2017		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	
			IBEW LOCAL 2323 PAC (International Brotherhoo			
<b>Street Address</b>					<b>Street Address</b>	
22 AMFLEX DRIVE						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
CRANSTON			RI	02921		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	04/24/2017		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	
			INTERNATIONAL UNION OF PAINTERS & ALL			
<b>Street Address</b>					<b>Street Address</b>	
7234 PARKWAY DRIVE						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
HANOVER			MD	21076		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/01/2017		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	
			IRON WORKERS LOCAL 37			
<b>Street Address</b>					<b>Street Address</b>	
845 WATERMAN AVENUE						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
EAST PROVIDENCE			RI	02914		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/01/2017		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	
			PROVIDENCE RI CENTRAL FEDERATED COU			
<b>Street Address</b>					<b>Street Address</b>	
23 UNION STREET						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
BRISTOL			RI	02809		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/30/2017		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	
			REALTORS PAC OF RI			
<b>Street Address</b>					<b>Street Address</b>	
100 BIGNALL STREET						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
WARWICK			RI	02888		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/16/2017		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 BRICKLAYERS PAC			
<b>Street Address</b>					<b>Street Address</b>	
150 MIDWAY ROAD, SUITE 157						
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State Zip</b>
CRANSTON			RI	02920-5743		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	06/05/2017		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 BROTHERHOOD OF CORRECTIONAL OFFIC				
<b>Street Address</b>					<b>Street Address</b>		
PO BOX 8273							
<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	PAC	05/09/2017		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 CARPENTERS PAC				
<b>Street Address</b>					<b>Street Address</b>		
14 JEFFERSON PARK ROAD							
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
WARWICK		RI	02888				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/26/2017		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		
			RI CHIROPRACTIC PAC FUND				
<b>Street Address</b>					<b>Street Address</b>		
779 HIGH STREET							
<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
	Check	PAC	05/17/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			RI EM PAC (Emergency Medicine)				
<b>Street Address</b>					<b>Street Address</b>		
405 PROMENADE STREET SUITE A							
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
PROVIDENCE		RI	02908				

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/09/2017		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 LABORERS' PAC				
<b>Street Address</b>					<b>Street Address</b>		
410 SOUTH MAIN STREET							
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
PROVIDENCE		RI	02903				



Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/19/2017		250.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			RI MEDICAL PAC				
<b>Street Address</b>					<b>Street Address</b>		
405 PROMENADE STREET STE A							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
PROVIDENCE			RI	02908			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/11/2017		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 NERCC PAC (New England Regional Council of				
<b>Street Address</b>					<b>Street Address</b>		
14 JEFFERSON PARK ROAD							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
WARWICK			RI	02888			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/17/2017		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		
			RIALA PAC (RI Assisted Living Association)				
<b>Street Address</b>					<b>Street Address</b>		
500 NORTH BROADWAY							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
EAST PROVIDENCE			RI	02914			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	05/09/2017		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		
			RIOA PAC (RI Optometric Association)				
<b>Street Address</b>					<b>Street Address</b>		
C/O STEVEN SANTOS							
<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
	Check	PAC	05/01/2017		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		
			UNITED FOOD & COMMERCIAL WORKERS U				
<b>Street Address</b>					<b>Street Address</b>		
278 SILVER SPRING STREET							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
PROVIDENCE			RI	02904-2593			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Party	06/05/2017		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			
			WARREN DEMOCRATIC TOWN COMMITTEE					
<b>Street Address</b>					<b>Street Address</b>			
820 MAIN ST, APT A								
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
WARREN			RI	02885				

CF-3

Rev. 3/02

**SCHEDULE OF EXPENDITURES**

Key #	Full Name of Candidate or Committee	Reporting Period
6,965	GINA M. RAIMONDO	From: 04/01/2017 To: 06/30/2017

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/05/2017		Campaign Expenditure	Bank Fees	\$52.50

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			ActBlue		
Street Address			City	State	Zip
P.O. Box 382110			Cambridge	MA	02138

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/05/2017		Campaign Expenditure	Bank Fees	\$2.97

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			ActBlue		
Street Address			City	State	Zip
P.O. Box 382110			Cambridge	MA	02138

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Office Equipment & Supplies	\$53.49

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			Adobe Systems		
Street Address			City	State	Zip
345 Park Avenue			San Jose	CA	95110

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/10/2017		Campaign Expenditure	Office Equipment & Supplies	\$53.49

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			Adobe Systems		
Street Address			City	State	Zip
345 Park Avenue			San Jose	CA	95110

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/10/2017		Campaign Expenditure	Office Equipment & Supplies	\$53.49

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			Adobe Systems		
Street Address			City	State	Zip
345 Park Avenue			San Jose	CA	95110

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Office Equipment & Supplies	\$25.32

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Amazon Marketplace		
Street Address			City	State	Zip
1200 12th Ave South			Seattle	WA	98144

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Office Equipment & Supplies	\$0.25

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Amazon Marketplace		
Street Address			City	State	Zip
1200 12th Ave South			Seattle	WA	98144

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$223.20

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			American Airlines		
Street Address			City	State	Zip
4333 Amon Carter Blvd.			Fort Worth	TX	76155

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$223.20

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			American Airlines		
Street Address			City	State	Zip
4333 Amon Carter Blvd.			Fort Worth	TX	76155

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$223.20

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			American Airlines		
Street Address			City	State	Zip
4333 Amon Carter Blvd.			Fort Worth	TX	76155

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/15/2017		Campaign Expenditure	Travel & Lodging	\$8.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Amtrak		
Street Address			City	State	Zip
100 Gaspee St			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/07/2017		Campaign Expenditure	Travel & Lodging	\$171.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amtrak	
Street Address	City	State	Zip	
100 Gaspee St	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/07/2017		Campaign Expenditure	Travel & Lodging	\$684.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Amtrak	
Street Address	City	State	Zip	
100 Gaspee St	Providence	RI	02903	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/02/2017		Campaign Expenditure	Bank Fees	\$23.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Authnet Gateway	
Street Address	City	State	Zip	
P.O. Box 8999	San Francisco	CA	94128	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/02/2017		Campaign Expenditure	Bank Fees	\$58.75

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Authnet Gateway	
Street Address	City	State	Zip	
P.O. Box 8999	San Francisco	CA	94128	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/04/2017		Campaign Expenditure	Bank Fees	\$35.95

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Authnet Gateway	
Street Address	City	State	Zip	
P.O. Box 8999	San Francisco	CA	94128	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/30/2017		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Bank RI	
Street Address	City	State	Zip	
P.O Box 9488	Providence	RI	02940	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Bank Fees	\$100.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/31/2017		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/14/2017		Campaign Expenditure	Bank Fees	\$10.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/20/2017		Campaign Expenditure	Bank Fees	\$10.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bank RI		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$5.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Bank RI	
Street Address			City	State Zip
P.O Box 9488			Providence	RI 02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$186.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Bank RI	
Street Address			City	State Zip
P.O Box 9488			Providence	RI 02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3048	04/14/2017		Campaign Expenditure	Consultant & Professional Services	\$320.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Beacon Mutual Insurance	
Street Address			City	State Zip
PO Box 33195			Hartford	CT 06150

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3068	05/25/2017		Campaign Expenditure	Consultant & Professional Services	\$1,000.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Collin		Berglund	
Street Address			City	State Zip
1155 Ripley St, Apt 2019			Silver Spring	MD 20910

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3090	06/23/2017		Campaign Expenditure	Consultant & Professional Services	\$500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Collin		Berglund	
Street Address			City	State Zip
1155 Ripley St, Apt 2019			Silver Spring	MD 20910

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/11/2017		Campaign Expenditure	Food, Beverages and Meals	\$632.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Bottles, LLC	
Street Address			City	State Zip
141 Pitman St			Providence	RI 02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/12/2017		Campaign Expenditure	Food, Beverages and Meals	\$66.66

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bottles, LLC		
Street Address			City	State	Zip
141 Pitman St			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/12/2017		Campaign Expenditure	Food, Beverages and Meals	\$81.30

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Bottles, LLC		
Street Address			City	State	Zip
141 Pitman St			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/12/2017		Campaign Expenditure	Food, Beverages and Meals	\$156.23

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/15/2017		Campaign Expenditure	Food, Beverages and Meals	\$493.64

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Camille's		
Street Address			City	State	Zip
71 Bradford St			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/30/2017		Campaign Expenditure	Food, Beverages and Meals	\$71.98

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Campus Fine Wines		
Street Address			City	State	Zip
127 Brook St			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$119.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$119.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$119.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/22/2017		Campaign Expenditure	Travel & Lodging	\$268.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/22/2017		Campaign Expenditure	Travel & Lodging	\$139.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/22/2017		Campaign Expenditure	Travel & Lodging	\$139.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cape Air		
Street Address			City	State	Zip
660 Barnstable Road			Hyannis	MA	02601

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Food, Beverages and Meals	\$778.49

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Capital Grille		
Street Address			City	State	Zip
155 East 42nd St			New York	NY	10017

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3077	06/16/2017		Campaign Expenditure	Consultant & Professional Services	\$500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Connie Grosch Photography		
Street Address			City	State	Zip
20 Freese St			Providence	RI	02908

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3078	06/16/2017		Campaign Expenditure	Telephone	\$60.33

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cox Communications		
Street Address			City	State	Zip
9 JP Murphy Highway			West Warwick	RI	02893

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Rent & Utilities	\$60.33

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Cox Communications		
Street Address			City	State	Zip
9 JP Murphy Highway			West Warwick	RI	02893

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Office Equipment & Supplies	\$15.37

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CVS		
Street Address			City	State	Zip
70 Kennedy Plaza			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/17/2017		Campaign Expenditure	Office Equipment & Supplies	\$268.97

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CVS		
Street Address			City	State	Zip
70 Kennedy Plaza			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/24/2017		Campaign Expenditure	Office Equipment & Supplies	\$287.84

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			CVS		
Street Address			City	State	Zip
70 Kennedy Plaza			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3063	05/10/2017		Campaign Expenditure	Fundraising Expenses	\$5,166.67

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Emily's List		
Street Address			City	State	Zip
1800 M Street Suite 375 N			Washington	DC	20036

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/05/2017		Campaign Expenditure	Advertising	\$25.14

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Facebook		
Street Address			City	State	Zip
1601 S California Ave			Palo Alto	CA	94304

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Gifts	\$73.84

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Flower Shop Network		
Street Address			City	State	Zip
103 Monroe t			Paragould	AR	72450

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3074	06/01/2017		Campaign Expenditure	Consultant & Professional Services	\$2,500.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3045	04/03/2017		Campaign Expenditure	Consultant & Professional Services	\$2,500.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3059	05/03/2017		Campaign Expenditure	Consultant & Professional Services	\$2,500.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/12/2017		Campaign Expenditure	Other	\$16.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Gatehouse Media, LLC		
Street Address			City	State	Zip
175 Sully's Trail, 3rd Fl			Pittsford	NY	14534

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/24/2017		Campaign Expenditure	Travel & Lodging	\$36.95

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			GoGoAir.com		
Street Address			City	State	Zip
111 North Canal St			Chicago	IL	60606

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Travel & Lodging	\$199.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Hahn Air USA, Inc.		
Street Address			City	State	Zip
333 S. 7th St			Minneapolis	MN	55402

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3085	06/16/2017		Campaign Expenditure	Employee Services	\$405.76

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Health Source RI		
Street Address			City	State	Zip
PO Box 9711			Providence	RI	02940-9711

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3071	05/25/2017		Campaign Expenditure	Employee Services	\$405.76

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Health Source RI		
Street Address			City	State	Zip
PO Box 9711			Providence	RI	02940-9711

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3055	04/14/2017		Campaign Expenditure	Employee Services	\$405.76

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Health Source RI		
Street Address			City	State	Zip
PO Box 9711			Providence	RI	02940-9711

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Travel & Lodging	\$377.27

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Hotels.com		
Street Address			City	State	Zip
5400 LBJ Freeway, Suite 500			Dallas	TX	75240

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Employee Services	\$1,615.60

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Internal Revenue Service		
Street Address			City	State	Zip
Department of the Treasury			Atlanta	GA	39901

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/14/2017		Campaign Expenditure	Employee Services	\$807.80

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Internal Revenue Service		
Street Address			City	State	Zip
Department of the Treasury			Atlanta	GA	39901

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/15/2017		Campaign Expenditure	Employee Services	\$807.80

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Internal Revenue Service		
Street Address			City	State	Zip
Department of the Treasury			Atlanta	GA	39901

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/09/2017		Campaign Expenditure	Employee Services	\$807.80

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Internal Revenue Service		
Street Address			City	State	Zip
Department of the Treasury			Atlanta	GA	39901

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Employee Services	\$1,615.60

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Internal Revenue Service		
Street Address			City	State	Zip
Department of the Treasury			Atlanta	GA	39901

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/26/2017		Campaign Expenditure	Food, Beverages and Meals	\$32.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jacky's Waterplace		
Street Address			City	State	Zip
200 Exchange Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/13/2017		Campaign Expenditure	Food, Beverages and Meals	\$40.29

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jacky's Waterplace		
Street Address			City	State	Zip
200 Exchange Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Travel & Lodging	\$1,077.60

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jet Blue		
Street Address			City	State	Zip
118-29 Queens Plz N, Suite 1			New York	NY	11101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$410.87

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jolley Hotel		
Street Address			City	State	Zip
22 E. 38th St			New York	NY	10016

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$410.87

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jolley Hotel		
Street Address			City	State	Zip
22 E. 38th St			New York	NY	10016

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$410.87

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jolley Hotel		
Street Address			City	State	Zip
22 E. 38th St			New York	NY	10016

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Travel & Lodging	\$447.59

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Jolley Hotel		
Street Address			City	State	Zip
22 E. 38th St			New York	NY	10016

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/04/2017		Campaign Expenditure	Food, Beverages and Meals	\$95.88

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ladder 133		
Street Address			City	State	Zip
133 Douglas Ave			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/03/2017		Campaign Expenditure	Bank Fees	\$3,990.66

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Merchant Bank		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/03/2017		Campaign Expenditure	Bank Fees	\$6,598.23

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Merchant Bank		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/05/2017		Campaign Expenditure	Bank Fees	\$3,588.94

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Merchant Bank		
Street Address			City	State	Zip
P.O Box 9488			Providence	RI	02940

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/18/2017		Campaign Expenditure	Gifts	\$103.31

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Mills Florist		
Street Address			City	State	Zip
235 University Ave			Palo Alto	CA	94301

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/17/2017		Campaign Expenditure	Fundraising Expenses	\$1,800.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			NGP Software, Inc.		
Street Address			City	State	Zip
1225 Eye Street, NW Suite 1225			Washington	DC	20005

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/27/2017		Campaign Expenditure	Fundraising Expenses	\$114.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			NGP Software, Inc.		
Street Address			City	State	Zip
1225 Eye Street, NW Suite 1225			Washington	DC	20005

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/22/2017		Campaign Expenditure	Fundraising Expenses	\$30.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			NGP Software, Inc.		
Street Address			City	State	Zip
1225 Eye Street, NW Suite 1225			Washington	DC	20005

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/04/2017		Campaign Expenditure	Gifts	\$119.74

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ode à la Rose Florist		
Street Address			City	State	Zip
120 W 28th St			New York	NY	10001

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Gifts	\$3.34

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ode à la Rose Florist		
Street Address			City	State	Zip
120 W 28th St			New York	NY	10001

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/06/2017		Campaign Expenditure	Fundraising Expenses	\$563.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ogie's Trailer Park		
Street Address			City	State	Zip
1155 Westminster St			Providence	RI	02909



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/06/2017		Campaign Expenditure	Fundraising Expenses	\$2,400.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Ogie's Trailer Park	
Street Address			City	State Zip
1155 Westminster St			Providence	RI 02909

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/26/2017		Campaign Expenditure	Fundraising Expenses	\$47.81

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Party City	
Street Address			City	State Zip
231A Highland Ave			Seekonk	MA 02771

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Fundraising Expenses	\$500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Pawtucket Country Club	
Street Address			City	State Zip
900 Armistice Blvd.			Pawtucket	RI 02860

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/17/2017		Campaign Expenditure	Food, Beverages and Meals	\$781.59

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Pawtucket Country Club	
Street Address			City	State Zip
900 Armistice Blvd.			Pawtucket	RI 02860

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3066	05/10/2017		Campaign Expenditure	Consultant & Professional Services	\$2,148.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Perkins Coie, LLP	
Street Address			City	State Zip
1201 Third Ave, Ste 4900			Seattle	WA 98101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3050	04/14/2017		Campaign Expenditure	Consultant & Professional Services	\$756.63

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Perkins Coie, LLP	
Street Address			City	State Zip
1201 Third Ave, Ste 4900			Seattle	WA 98101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3089	06/23/2017		Campaign Expenditure	Consultant & Professional Services	\$4,183.98

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Perkins Coie, LLP		
Street Address			City	State	Zip
1201 Third Ave, Ste 4900			Seattle	WA	98101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3086	06/16/2017		Campaign Expenditure	Consultant & Professional Services	\$120.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Perkins Coie, LLP		
Street Address			City	State	Zip
1201 Third Ave, Ste 4900			Seattle	WA	98101

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3061	05/04/2017		Campaign Expenditure	Advertising	\$351.20

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			PMA Industries, Inc.		
Street Address			City	State	Zip
681 Killingly Street			Johnston	RI	02919

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/03/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Kathryn		Ramstad-Albert		
Street Address			City	State	Zip
30A Jenckes Street			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3056	04/26/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Kathryn		Ramstad-Albert		
Street Address			City	State	Zip
30A Jenckes Street			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3046	04/05/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Kathryn		Ramstad-Albert		
Street Address			City	State	Zip
30A Jenckes Street			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3067	05/22/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Kathryn		Ramstad-Albert	
Street Address	City	State	Zip	
30A Jenckes Street	Providence	RI	02906	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3073	06/01/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Kathryn		Ramstad-Albert	
Street Address	City	State	Zip	
30A Jenckes Street	Providence	RI	02906	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3091	06/23/2017		Campaign Expenditure	Employee Services	\$1,759.70

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
	Kathryn		Ramstad-Albert	
Street Address	City	State	Zip	
30A Jenckes Street	Providence	RI	02906	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3081	06/16/2017		Campaign Expenditure	Other	\$782.17

**Purpose of Expenditure**

**Payee Information**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3053	04/14/2017		Campaign Expenditure	Other	\$845.30

**Purpose of Expenditure**

Printing

**Payee Information**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/10/2017		Campaign Expenditure	Other	\$264.29

**Purpose of Expenditure**

Printing

**Payee Information**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/07/2017		Campaign Expenditure	Office Equipment & Supplies	\$22.06

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Rhode Island College		
Street Address			City	State	Zip
600 Mt. Pleasant Ave			Providence	RI	02908

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3047	04/13/2017		Campaign Expenditure	Employee Services	\$187.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			RI Division of Taxation		
Street Address			City	State	Zip
One Capitol Hill			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3062	05/10/2017		Campaign Expenditure	Employee Services	\$187.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			RI Division of Taxation		
Street Address			City	State	Zip
One Capitol Hill			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3057	05/01/2017		Campaign Expenditure	Employee Services	\$1,080.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			RI Division of Taxation		
Street Address			City	State	Zip
One Capitol Hill			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3077	06/16/2017		Campaign Expenditure	Employee Services	\$187.50

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			RI Division of Taxation		
Street Address			City	State	Zip
One Capitol Hill			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/19/2017		Campaign Expenditure	Food, Beverages and Meals	\$250.81

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ristorante Roma		
Street Address			City	State	Zip
10 Atwells Ave			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/10/2017		Campaign Expenditure	Food, Beverages and Meals	\$77.78

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Sandwich Hut		
Street Address			City	State	Zip
1253 North Main Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Food, Beverages and Meals	\$17.83

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Shayna's Place		
Street Address			City	State	Zip
45 Brown St			North Kingstown	RI	02852

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Food, Beverages and Meals	\$85.75

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Shayna's Place		
Street Address			City	State	Zip
45 Brown St			North Kingstown	RI	02852

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3083	06/16/2017		Campaign Expenditure	Rent & Utilities	\$565.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Shuster Realty LLC		
Street Address			City	State	Zip
909 North Main Street			Providence	RI	02904

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3051	04/14/2017		Campaign Expenditure	Rent & Utilities	\$565.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Shuster Realty LLC		
Street Address			City	State	Zip
909 North Main Street			Providence	RI	02904

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3069	05/25/2017		Campaign Expenditure	Rent & Utilities	\$565.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Shuster Realty LLC		
Street Address			City	State	Zip
909 North Main Street			Providence	RI	02904

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Office Equipment & Supplies	\$19.26

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			South County Medical Group	
Street Address	City	State	Zip	
70 Kenyon Ave, #211	Wakefield	RI	02879	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Travel & Lodging	\$938.85

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Southwest Airlines	
Street Address	City	State	Zip	
2702 Love Field Dr	Dallas	TX	75235-1908	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Travel & Lodging	\$186.98

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Southwest Airlines	
Street Address	City	State	Zip	
2702 Love Field Dr	Dallas	TX	75235-1908	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3088	06/23/2017		Campaign Expenditure	Food, Beverages and Meals	\$705.22

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Spirito's Restaurant and Catering	
Street Address	City	State	Zip	
477 Broadway	Providence	RI	02909	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Office Equipment & Supplies	\$115.29

**Purpose of Expenditure**

**Payee Information**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Office Equipment & Supplies	\$85.59

**Purpose of Expenditure**

**Payee Information**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/04/2017		Campaign Expenditure	Office Equipment & Supplies	\$207.75

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Office Equipment & Supplies	\$18.50

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/26/2017		Campaign Expenditure	Office Equipment & Supplies	\$147.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/25/2017		Campaign Expenditure	Office Equipment & Supplies	\$32.61

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/13/2017		Campaign Expenditure	Office Equipment & Supplies	\$168.73

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/13/2017		Campaign Expenditure	Office Equipment & Supplies	\$196.00

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/06/2017		Campaign Expenditure	Office Equipment & Supplies	\$330.52

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/05/2017		Campaign Expenditure	Office Equipment & Supplies	\$143.36

**Purpose of Expenditure**

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

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/12/2017		Campaign Expenditure	Food, Beverages and Meals	\$20.14

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Starbucks		
Street Address			City	State	Zip
468 Angell St			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/24/2017		Campaign Expenditure	Food, Beverages and Meals	\$11.60

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Starbucks		
Street Address			City	State	Zip
468 Angell St			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3072	06/01/2017		Campaign Expenditure	Refunds/Reimbursements	\$4,513.50

**Purpose of Expenditure**

Travel & Meetings

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			State of Rhode Island		
Street Address			City	State	Zip
82 Smith Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/03/2017		Campaign Expenditure	Food, Beverages and Meals	\$246.29

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Sydney Providence		
Street Address			City	State	Zip
400 Exchange St			Providence	RI	02903



Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Food, Beverages and Meals	\$42.93

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Hub		
Street Address			City	State	Zip
31 Main St			Nantucket	MA	02554

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/27/2017		Campaign Expenditure	Food, Beverages and Meals	\$961.94

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Malted Barley		
Street Address			City	State	Zip
334 Westminster St			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/13/2017		Campaign Expenditure	Office Equipment & Supplies	\$16.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Providence Journal		
Street Address			City	State	Zip
75 Fountain Street			Providence	RI	02902

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/12/2017		Campaign Expenditure	Office Equipment & Supplies	\$16.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Providence Journal		
Street Address			City	State	Zip
75 Fountain Street			Providence	RI	02902

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3052	04/14/2017		Campaign Expenditure	Food, Beverages and Meals	\$1,340.28

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The University Club		
Street Address			City	State	Zip
219 Benefit Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3054	04/14/2017		Campaign Expenditure	Food, Beverages and Meals	\$18.15

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The University Club		
Street Address			City	State	Zip
219 Benefit Street			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3080	06/16/2017		Campaign Expenditure	Food, Beverages and Meals	\$2,400.69

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			The University Club	
Street Address			City	State Zip
219 Benefit Street			Providence	RI 02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3082	06/16/2017		Campaign Expenditure	Food, Beverages and Meals	\$13.17

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			The University Club	
Street Address			City	State Zip
219 Benefit Street			Providence	RI 02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3075	06/01/2017		Campaign Expenditure	Fundraising Expenses	\$5,270.40

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Tom's Market Catering	
Street Address			City	State Zip
821 Tiogue Ave			Coventry	RI 02816

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Food, Beverages and Meals	\$1,008.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Trattoria Romania	
Street Address			City	State Zip
3 Wake Robin Rd			Lincoln	RI 02865

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Travel & Lodging	\$70.05

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Travel Insurance Policy	
Street Address			City	State Zip
9950 Mayland Drive			Richmond	VA 23233

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$156.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			United Airlines	
Street Address			City	State Zip
233 S. Wacker Dr			Chicago	IL 60606

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$156.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			United Airlines		
Street Address			City	State	Zip
233 S. Wacker Dr			Chicago	IL	60606

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/22/2017		Campaign Expenditure	Travel & Lodging	\$156.20

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			United Airlines		
Street Address			City	State	Zip
233 S. Wacker Dr			Chicago	IL	60606

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3060	05/04/2017		Campaign Expenditure	Office Equipment & Supplies	\$76.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			US Postal Service		
Street Address			City	State	Zip
24 Corliss St			Providence	RI	02904

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/09/2017		Campaign Expenditure	Bank Fees	\$0.55

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Vantiv		
Street Address			City	State	Zip
8500 Governors Hill Drive			Symmestown Township	OH	45249

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/10/2017		Campaign Expenditure	Bank Fees	\$1.17

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Vantiv		
Street Address			City	State	Zip
8500 Governors Hill Drive			Symmestown Township	OH	45249

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/03/2017		Campaign Expenditure	Bank Fees	\$8.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Vantiv		
Street Address			City	State	Zip
8500 Governors Hill Drive			Symmestown Township	OH	45249

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/07/2017		Campaign Expenditure	Bank Fees	\$9.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Bank Fees	\$5.89

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/08/2017		Campaign Expenditure	Bank Fees	\$21.82

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/29/2017		Campaign Expenditure	Bank Fees	\$83.53

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$1.31

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$37.73

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Vantiv	
Street Address	City	State	Zip	
8500 Governors Hill Drive	Symmes Township	OH	45249	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$18.54

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Vantiv		
Street Address			City	State	Zip
8500 Governors Hill Drive			Symmes Township	OH	45249

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3076	06/13/2017		Campaign Expenditure	Food, Beverages and Meals	\$1,063.80

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Venda Ravioli		
Street Address			City	State	Zip
265 Atwells Ave			Providence	RI	02903

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3084	06/16/2017		Campaign Expenditure	Travel & Lodging	\$232.02

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Verizon Wireless		
Street Address			City	State	Zip
PO Box 15062			Albany	NY	12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/09/2017		Campaign Expenditure	Travel & Lodging	\$113.85

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Verizon Wireless		
Street Address			City	State	Zip
PO Box 15062			Albany	NY	12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3070	05/25/2017		Campaign Expenditure	Travel & Lodging	\$234.14

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Verizon Wireless		
Street Address			City	State	Zip
PO Box 15062			Albany	NY	12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/10/2017		Campaign Expenditure	Telephone	\$113.81

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Verizon Wireless		
Street Address			City	State	Zip
PO Box 15062			Albany	NY	12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3049	04/14/2017		Campaign Expenditure	Telephone	\$231.90

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Verizon Wireless	
Street Address			City	State Zip
PO Box 15062			Albany	NY 12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/08/2017		Campaign Expenditure	Travel & Lodging	\$113.85

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Verizon Wireless	
Street Address			City	State Zip
PO Box 15062			Albany	NY 12212-5062

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Food, Beverages and Meals	\$367.58

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Wakefield Liquors	
Street Address			City	State Zip
667 Kingstown Rd			Wakefield	RI 02879

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/23/2017		Campaign Expenditure	Office Equipment & Supplies	\$32.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Wall Street Journal	
Street Address			City	State Zip
1211 Avenue of the Americas			New York	NY 10036

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/24/2017		Campaign Expenditure	Office Equipment & Supplies	\$32.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Wall Street Journal	
Street Address			City	State Zip
1211 Avenue of the Americas			New York	NY 10036

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/23/2017		Campaign Expenditure	Office Equipment & Supplies	\$32.99

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix
			Wall Street Journal	
Street Address			City	State Zip
1211 Avenue of the Americas			New York	NY 10036

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/26/2017		Campaign Expenditure	Travel & Lodging	\$1,589.64

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			White Elephant		
Street Address			City	State	Zip
50 Easton St			Nantucket	RI	02554

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/24/2017		Campaign Expenditure	Food, Beverages and Meals	\$16.46

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Windy City		
Street Address			City	State	Zip
5700 S. Cicero Ave			Chicago	IL	60638

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Food, Beverages and Meals	\$20.04

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Windy City		
Street Address			City	State	Zip
5700 S. Cicero Ave			Chicago	IL	60638

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/25/2017		Campaign Expenditure	Food, Beverages and Meals	\$26.93

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Windy City		
Street Address			City	State	Zip
5700 S. Cicero Ave			Chicago	IL	60638

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	05/31/2017		Campaign Expenditure	Bank Fees	\$32.38

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Woodsboro Bank		
Street Address			City	State	Zip
5 N Main St.			Woodsboro	MD	21798

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	04/28/2017		Campaign Expenditure	Bank Fees	\$49.58

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Woodsboro Bank		
Street Address			City	State	Zip
5 N Main St.			Woodsboro	MD	21798

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/30/2017		Campaign Expenditure	Bank Fees	\$27.73

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Woodsboro Bank		
Street Address			City	State	Zip
5 N Main St.			Woodsboro	MD	21798

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/01/2017		Campaign Expenditure	Food, Beverages and Meals	\$136.28

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Yvonne's		
Street Address			City	State	Zip
2 Winter Pl			Boston	MA	02108

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3064	05/10/2017		Refund of Contribution	Other	\$500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Frederick		Godley		
Street Address			City	State	Zip
28 Lands End Dr			North Kingstown	RI	02852

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
3079	06/16/2017		Refund of Contribution	Other	\$500.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Ryan	E.	Hutchins		
Street Address			City	State	Zip
17 Colby Rd.			Wellesley	MA	02482

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	06/20/2017		Refund of Contribution	Other	\$15.00

**Purpose of Expenditure**

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Cathya	W.	Stephenson		
Street Address			City	State	Zip
3050 Military Rd NW, Apt 404			Washington	DC	02015-1358