

**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#
SETH MAGAZINER	7818

Street Address	City/Town, State and Zip Code
PO BOX 303	PROVIDENCE, RI 02901

Mailing Address (if different)	City/Town, State and Zip Code
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Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 374-3979	(401) 580-1442		seth.magaziner@gmail.com

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

Reporting Period (Dates):	Period Beginning: 12/04/2018	Period Ending: 12/31/2018
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**SUMMARY OF ACTIVITY FOR PERIOD**

1. Beginning Cash Balance	\$ 506,220.44
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	0
3. Political Parties	0
4. Political Action Committees	520.00
5. Loan Proceeds	0
6. Payroll Check off	0
7. Interest Received	598.14
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	0
14. Returned Checks	0
b. Other:	0
	0
	0
	0
3. Total Cash	507,338.58
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	13,795.52
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	\$ 493,543.06

**CAMPAIGN FUND STATUS**

6. Report of In-Kind Contributions	0
7. Cash	\$ 493,543.06
8. Other Assets	0
	0
	0
9. Total Assets	\$ 493,543.06

**LIABILITIES AND FUND BALANCE**

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	701,500.00
c. Other Liabilities	0
	0
	0
11. Total Liabilities	701,500.00
12. Total Fund Balance	\$(207,956.94)
13. Total Liability / Fund Balance	493,543.06

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>	<b>Full Name of Candidate or Committee</b>	<b>Reporting Period</b>	
7,818	SETH MAGAZINER	<b>From: 12/04/2018</b>	<b>To: 12/31/2018</b>

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	Other	Interest Received	12/31/2018		598.14

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
<b>Prefix</b>	<b>First Name</b>	<b>MI</b>	<b>Last Name or PAC/Party Committee Name</b>	<b>Suffix</b>	<b>Employer Name</b>		
			Navigant Credit Union				
<b>Street Address</b>					<b>Street Address</b>		
1005 Douglas Pike							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b> <b>Zip</b>
Smithfield			RI	02917			

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	Check	PAC	12/12/2018		20.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
<b>Prefix</b>	<b>First Name</b>	<b>MI</b>	<b>Last Name or PAC/Party Committee Name</b>	<b>Suffix</b>	<b>Employer Name</b>		
			BARRINGTON POLICE IBPO LOCAL 351 FOP L				
<b>Street Address</b>					<b>Street Address</b>		
100 FEDERAL ROAD							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b> <b>Zip</b>
BARRINGTON			RI	02806			

<b>Item</b>	<b>Transaction Type</b>	<b>Contribution Type</b>	<b>Receipt Date</b>	<b>Deposit Date</b>	<b>Contribution Amount</b>
	Check	PAC	12/12/2018		500.00

**In Kind/Other Receipts Description**

Contributor Information					Employer Data		
<b>Prefix</b>	<b>First Name</b>	<b>MI</b>	<b>Last Name or PAC/Party Committee Name</b>	<b>Suffix</b>	<b>Employer Name</b>		
			LIUNA EDUCATION FUND RHODE ISLAND				
<b>Street Address</b>					<b>Street Address</b>		
905 16TH STREET, NW, 2ND FLOOR							
<b>City</b>			<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b> <b>Zip</b>
WASHINGTON			DC	20006			

**SCHEDULE OF EXPENDITURES**

Key #	Full Name of Candidate or Committee	Reporting Period
7,818	SETH MAGAZINER	From: 12/04/2018 To: 12/31/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1029	12/12/2018		Campaign Expenditure	Employee Services	\$1,290.75

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Morgan		Alger		
Street Address			City	State	Zip
490 Old Coach Rd			Charlestown	RI	02813

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
1031	12/18/2018		Campaign Expenditure	Employee Services	\$1,290.76

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Morgan		Alger		
Street Address			City	State	Zip
490 Old Coach Rd			Charlestown	RI	02813

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
517	12/04/2018		Campaign Expenditure	Consultant & Professional Services	\$4,000.00

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	Julie		Andrews		
Street Address			City	State	Zip
294 Wayland Avenue			Providence	RI	02906

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/06/2018		Campaign Expenditure	Employee Services	\$2,146.54

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	LeeAnn		Byrne		
Street Address			City	State	Zip
56 Alvira Ave			Warwick	RI	02888

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/20/2018		Campaign Expenditure	Employee Services	\$2,146.54

**Purpose of Expenditure**

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
	LeeAnn		Byrne		
Street Address			City	State	Zip
56 Alvira Ave			Warwick	RI	02888

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
476	12/19/2018		Campaign Expenditure	Donations (All Others)	\$100.00

**Purpose of Expenditure**

Mundialito Scholarship Sponsorship

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			City of Central Falls Park & Recreation & Community Services Department		
Street Address			City	State	Zip
580 Broad Street			Central Falls	RI	02863

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/21/2018		Campaign Expenditure	Employee Services	\$35.99

**Purpose of Expenditure**

EIB fee

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex Inc		
Street Address			City	State	Zip
501 Wampanoag Trl			Riverside	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/21/2018		Campaign Expenditure	Employee Services	\$1,082.96

**Purpose of Expenditure**

taxes

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex Inc		
Street Address			City	State	Zip
501 Wampanoag Trl			Riverside	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/07/2018		Campaign Expenditure	Employee Services	\$37.55

**Purpose of Expenditure**

EIB fee

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex Inc		
Street Address			City	State	Zip
501 Wampanoag Trl			Riverside	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	12/07/2018		Campaign Expenditure	Employee Services	\$1,568.43

**Purpose of Expenditure**

taxes

**Payee Information**

Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Paychex Inc		
Street Address			City	State	Zip
501 Wampanoag Trl			Riverside	RI	02915

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
518	12/31/2018		Campaign Expenditure	Rent & Utilities	\$96.00

**Purpose of Expenditure**

PO Box annual fee

**Payee Information**

<b>Prefix</b>	<b>First Name</b>	<b>MI</b>	<b>LastName or Vendor Name</b>	<b>Suffix</b>	
			USPS		
<b>Street Address</b>			<b>City</b>	<b>State</b>	<b>Zip</b>
2 Exchange Terrace			Providence	RI	02903

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