

State of Rhode Island and Providence Plantations
Board of Elections
 Campaign Finance Unit
 50 Branch Avenue, Providence, Rhode Island 02904
 Telephone No. (401) 222-2345
 www.elections.ri.gov

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SUMMARY OF BALLOT QUESTION ADVOCACY ACTIVITY (BQA-1)

Office Time Stamp

Full Name of Ballot Question Advocate

Theodore Beckwith

Other Name(s) Under Which Ballot Question Advocacy Conducted

Concerned Citizens in Scituate

Street Address

408 Seaview Rd.

City/Town, State and Zip Code

Hope Rd 02831

Mailing Address (if different)

City/Town, State and Zip Code

Telephone Number

828-0488

Daytime Telephone Number

942-2283

Fax Number

946-0696

E-mail Address

info@PoolsByRichard.com

Name(s) and Address(es) of Endorsing or Member Organizations of This Ballot Question Advocate that have authorized the Ballot Question Advocate to use their name in support of their efforts: (Attach additional list if necessary)

Name

Theodore Beckwith

Address

408 Seaview Rd. Hope Rd.

The Question Whose Approval or Rejection the Ballot Question Advocate Intends to Advocate

Ballot Question:

Home Rule Charter

Approval Rejection

Summary of Activity for Reporting Period (see reverse for instructions)

Reporting Period Beginning Date: _____

Original Report

Reporting Period Ending Date: _____

Amended Report

Beginning Fund Balance: \$ 0

Plus: Total Amount Contributed This Period: \$ 1720

Minus: Total Amount Expended This Period: (\$ 1720)

Ending Fund Balance: \$ 0

In-Kind Contributions This Period: \$ _____

Pursuant to R.I.G.L. 17-25.2-5(a)(1): The Name, Address and, if applicable, the Place of Employment of every person making a contribution(s) that in the aggregate exceed \$1,800 per election cycle to a ballot question advocate for the purpose of ballot question advocacy must be identified.

See attached "Schedule of Contributions For Ballot Advocacy" (Form BQA-2) for Identified Contributions.

Pursuant to R.I.G.L. 17-25.2-5(a)(2): The Name and Address of every person or entity receiving an expenditure for ballot question advocacy, which in the aggregate exceeds \$100, must be identified.

See attached "Schedule of Expenditures For Ballot Advocacy" (Form BQA-3) for Identified Expenditures.

I hereby certify that this report of contributions and expenditures and the supporting documents are complete, true and correct and that I am responsible for its contents and for the ballot question advocate's compliance with the provisions of R.I.G.L. 17-25.2.

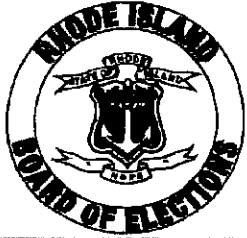
Theodore Beckwith
 Signature of Person Completing Report or An Officer of the Ballot Question Advocate Date 7/18/18

Print Name of Person Completing Report/Officer of the Ballot Question Advocate

Title of Person Completing Report/Officer of the Ballot Question Advocate

Address of Person Completing Report/Officer of the Ballot Question Advocate

Please see reverse side for instructions on how to complete this form.



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RHODE ISLAND
BOARD OF ELECTIONS

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Time Stamp
(For Office Use Only)

SCHEDULE OF EXPENDITURES FOR BALLOT ADVOCACY (BQA-3)

Full Name of Ballot Question Advocate

Reporting Period Beginning Date: _____

Original Report

Reporting Period Ending Date: _____

Amended Report

NAME AND ADDRESS OF PERSON TO WHOM EXPENDITURE WAS MADE	PURPOSE OF EXPENDITURE	DATE EXPENDITURE MADE	AMOUNT OF EXPENDITURE
Anthony...	Home Rule Charter Budget	6/8/18	560.00 850.00
Valley Breeze	Home Rule Same add	9/21/18	860.00 850.00