State of Rhode Island

Board of Elections

Campaign Finance Division 2000 Plainfield Pike, Cranston, RI 02921 Tel. (401)222-2345 Fax (401)222-4424 www.elections.ri.gov

SUMMARY OF CAMPAIGN ACTIVITY

Name of Candidate, Political Party DANIEL J MCKEE	, Political Action Commi	ittee			Key# 2235
Street Address			C	City/Town, State and Zip Code	
Mailing Address (if different)			C	City/Town, State and Zip Code	
Telephone Number Day	ytime Telephone Number	r	Fax Number E	-mail	
If Candidate Office Sought: Lieutenant Governor			•	ffiliation if any:	
	Period Beginning: 04/	/01/2021	Period Ending		
	CTIVITY FOR PERIOD		T CHOOL EHORING	. 00/30/2021	
Beginning Cash Balance Cash Receipts		\$ 450,367.72	4. Cash Disbursemen f. Other Disbursemen		
a. Contributions From:					0
1. Aggregate		55.00			0
a. (Individuals)		55.00			0
b. (Political Parties)		0	5. Ending Cash Balar	nce	\$ 716,595.55
c. (Political Action Comr	nittees)	0			
2. Individuals		298,681.89			
3. Political Parties		0		CAMPAIGN FUND STATUS	
4. Political Action Committee	ees	23,150.00	6. Report of In-Kind	Contributions	0
5. Loan Proceeds		0	o. Report of in Time	Controutions	· ·
Payroll Check off		0			
7. Interest Received		0	7. Cash		\$ 716,595.55
8. State Check Off		0	8. Other Assets		
9. Refund/Rebate		0			0
10. Party Building		0			0
11. Matching Public Funds		0			0
12. Other		0	9. Total Assets		\$ 716,595.55
13. Returned Contributions		(4,500.00)	LI	ABILITIES AND FUND BALANCE	
14. Returned Checks		(1,000.00)	10. Liabilities		
b. Other:		0	a. Accounts Payal	ole	\$ 0
		0	b. Loans Payable		46,922.88
		0	c. Other Liabilites	\$	
3. Total Cash		0 766,754.61			0
4. Cash Disbursements		/00,/34.01			0
a. Aggregate Expenses		0			0
b. Campaign Expenses		50,159.06	11. Total Liabilities		46,922.88
c. Repayment of Loans		0 0,139.00	12. Total Fund Balan	ce	\$ 669,672.67
d. Account Payable Repayments	2	0	13. Total Liability / F		716,595.55
e. Other	.	0	15. Total Elability / I	una Dalance	110,373.33

CF-2 Rev. 3/02

Name of Person Filing Report	I HEREBY CERTIFY THAT THIS REPORT OF CAMP. CONTRIBUTIONS AND EXPENDITURES AND THE DOCUMENTS ARE TRUE AND CORRECT.	
Title of Person Filing Report	X Signature of Person	Date
Address of Person Filing This Report	SUBSCRIBED AND SWORN TO BEFORE ME THIS Day of 20 X Notary Public	·

SCHEDULE OF CONTRIBUTIONS RECEIVED

Key # 2,235	Full Name o DANIEL J M		idate or Committee			porting Period om: 04/01/2021	To: 06/	30/2021
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Con	ntribution Amoun
	Other		Aggregate - Individual In Kind/Other Receipts De		06/30/2021	06/30/2021		20.00
				seription				
			tributor Information		I — — —		er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
Street A	Address				Street Addr	ess		
City			State Zip		City		State	Zip
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amoun
	Other		Aggregate - Individual		06/30/2021	06/30/2021		20.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street A	Address				Street Addr	ess		
City			State Zip		City		State	Zip
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amoun
	Other		Aggregate - Individual		06/30/2021	06/30/2021		15.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		CI Data	
Street A	Address				Street Addr	ess		
City			State Zip		City		State	Zip
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amoun
			In Kind/Other Receipts De	scription				
D 6	The A N		tributor Information	C . CC	le i v		er Data	
LIGHX	First Name Marvin	MI L.	Last Name or PAC/Party Committee Name Abney	Suffix II	Employer N State of RI	aine		
Street A			•		Street Addr	ess		
					82 Smith St			
12 Sum								
12 Sum City			State Zip		City		State	Zip

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/22/2021	Deposit Date	Oate Contribution Amoun 1,000.00		
			In Kind/Other Receipts Do	escription					
							D .		
Prefix Firs	-4 N	MI	ributor Information	Suffix	FI N	Employe	er Data		
	st Name chael	J.	Last Name or PAC/Party Committee Name Abruzese	Sumx	Employer Na Retired	ame			
Street Addre		•.	120112230		Street Addre	226			
5 Easthaven					5 Easthaven 1				
City			State Zip		City		State	Zip	
White Plains	i		NY 10605		White Plains		NY	10605	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun	
	Check		Individual		06/21/2021			1,000.00	
			In Kind/Other Receipts Do						
			_	_					
		Conti	ributor Information			Employe	er Data		
Prefix Firs	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame			
Mic	chael	D.	Abruzese		Polpettina				
Street Addre	ess				Street Addre				
41 West St					102 Fisher Av	venue	_		
City			State Zip		City		State	Zip	
White Plains			NY 10605		Eastchester		NY	10709	
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount	
	Check		Individual		06/21/2021			1,000.00	
			In Kind/Other Receipts Do	escription					
		C4-	il and an Information			F	D.4.		
Prefix Firs	-4 Name		ributor Information	Suffix	Employer Na	Employ	er Data		
	st Name ricia	MI A.	Last Name or PAC/Party Committee Name Abruzese	Sumx	Retired	ame			
Street Addre					Street Addre	955			
12 Club Poin					12 Club Poin				
City			State Zip		City		State	Zip	
White Plains			NY 10605		White Plains		NY	10605	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount	
	Check		Individual		06/22/2021	•		1,000.00	
			In Kind/Other Receipts Do	escription					
		Conti	ributor Information			Employe	er Data		
	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na				
	omas	В.	Abruzese		The Deck LL				
Street Addre					Street Addre				
3 Kirwins La	ane		a		3 Kirwins La	ne			
City			State Zip RI 02840		City		State RI	Zip 02840	
Newport					Newport				
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount	
	Credit/Debit Card		Individual		06/09/2021			250.00	
			In Kind/Other Receipts Do	escription					
		Cont	ributor Information			Employe	nr Data		
Prefix Fir	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		er Data		
rienz rif	ot Maine	TVAL	Last traine of 1740/1 arty Committee Ivame	Sullix	Employer Na	and the same			

Zip

22314

State

VA

Conduent

City

Street Address

Chesapeake

1434 Crossways Blvd

Zip

23320

State

VA

Kenneth

Street Address

1178 N Pitt St

Alexandria

City

Adami

Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Contribution Amount			
	Credit/Debit Card		Individual	(06/14/2021		200.00			
In Kind/Other Receipts Description										
Contributor Information						Employer	· Data			
Prefix	Prefix First Name MI Last Name or PAC/Party Committee Name				Employer N	ame				
	77		4.4 .			1: 1036 1 .: m	. •			

		Con	tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Kay		Adesina	Kaydolly Medical & Marketing Transporter Inc				
Street Address					Street Address			
28 Pade	lford St				28 Padelford St			
City			State Zip		City	State	Zip	
Provide	nce		RI 02906		Providence	RI	02906	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Contr	ribution Amount	
	Credit/Debit Card		Individual		06/15/2021		25.00	

T.,	V:-	4/04	on I) a a a in t	n Day	scription
ш	МП	a/Ou	ier r	tecem	s Des	scribuon

		Con	tributor Information		Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name				
	Kay		Adesina		Kaydolly Medical & Marketing	Transporter Inc			
Street A	Address				Street Address				
28 Pade	lford St				28 Padelford St				
City			State Zip		City	State Zip			
Provide	nce		RI 02906		Providence	RI 02906			
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Contribution Amount			
	Check		Individual		06/15/2021	500.00			

In Kind/Other Receipts Description

		Con	tributor Information	Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Luis	R.	Agrela		Rhody Rug Inc		
	Address I River Rd, Unit 5				Street Address 9 Powder Hill Rd		
City			State Zip		City	State	Zip
Lincoln	ı		RI 02865-1178		Lincoln	RI	02865
Item	Transaction Type		Contribution Type		Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		04/20/2021		1,000.00

In Kind/Other Receipts Description

		Con	tributor Information		Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name					
	Jane	M.	Ahlemeyer	lemeyer			Compassion Center of New England			
Street A	Address				Street Address					
55 McB	Bride Dr				1 Corliss Street					
City			State Zip		City	State	Zip			
Portsmo	outh		RI 02871-1348		Providence	RI	02904			
Item	Transaction Type Contribution Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount			
	Check		Individual		04/12/2021		1,000.00			

In Kind/Other Receipts Description

	Contributor Information						Employer Data			
Prefix	First Name	MI	Last Name or PAC/Part	ast Name or PAC/Party Committee Name Suffix			Employer Name			
	June	M.	Albanese				J. Albanese Contruction Co.			
Street Address				Street Address			Street Address			
18 Mountain Laurel Ln						18 Mountain Laurel Ln				
City		State Zip			City State		Zip			
North Scituate		RI 02857			North Scituate	RI	02857			

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/28/2021	Deposit Date	Co	ntribution Amo	ount 5.00
			In Kind/Other Receipts De						
			•	•					
		Con	tributor Information			Employe	r Data		
Prefix	First Name Patricia	MI	Last Name or PAC/Party Committee Name Alger	Suffix	Employer Na ER Alger & O				
	Address er Rd Unit 95				Street Addre 519 Mendon				
City Cumber	rland		State Zip RI 02864		City Cumberland		State RI	Zip 02864	
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/17/2021	Deposit Date	Co	ntribution Amo	ount 0.00
	CHCK		In Kind/Other Receipts De		00/17/2021			300	7.00
				•					
		Con	tributor Information			Employe	r Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na				
C44	Steven	Α.	Allegretti		Allegretti & A				
18 Lenn	Address non Rd				Street Addre	uisset Pike, Ste A104			
City	non Ru		State Zip		City	asset i ike, sie Aio-	State	Zip	
Lincoln	1		RI 02865		Lincoln		RI	02865	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amo	ount
	Credit/Debit Card		Individual		06/22/2021			500	0.00
			In Kind/Other Receipts De	scription					
							.		
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer Na	Employer	r Data		
пенх	William	J	Allen	Sumx	Retired	ame			
	Address te Whipple Hgy				Street Addre				
City			State Zip		City		State	Zip	
Cumber	rland		RI 02864		Cumberland		RI	02864	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amo	ount
	Credit/Debit Card		Individual		06/16/2021			100	0.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employe	r Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		Data		
	Drew		Allsopp		RI Dept Of E				
Street A	Address				Street Addre	ess			
940 Ho	pe St				255 Westmin	ster St			
City			State Zip		City		State	Zip	
Provide			RI 02906		Providence		RI	02903	—
Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 06/16/2021	Deposit Date	Co	ntribution Amo	o unt 0.00
	CHCK		In Kind/Other Receipts De		VV/ 10/ 2021			300	7.00
				- Pron					

Employer Data

Zip

02895

State

RI

Contributor Information

Almond

Prefix First Name

Street Address

6 Brookside Dr

City

Lincoln

Alison

Last Name or PAC/Party Committee Name

State

RI

Zip

02865

Suffix

Employer Name

Street Address

706 Social St

Woonsocket

City

Woonsocket Education Department

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
Prefix	First Name Ernest	MI	Last Name or PAC/Party Committee Name Almonte	Suffix	Employer Na State of RI	ame		
Street A 2 Sophi	Address a Lane				Street Addre 82 Smith Stre			
City Greenvi	ille		State Zip RI 02828		City Providence		State RI	Zip 02903
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/15/2021			100.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	on Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		er Data	
	Michael	A.	Alves			ms Leading Edge		
Street A	Address				Street Addre	ess		
35 Over	rhill Rd				2 Charles St			
City			State Zip		City		State	Zip
Warren			RI 02885		Providence		RI	02903
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/20/2021	Deposit Date	Co	ntribution Amount 200.00
	CHECK		In Kind/Other Receipts De		00/20/2021			200.00
			in initial other receipts 20	, ser грион				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Stephen	D.	Alves		Capital Strate	_		
	Address et Briar Lane				Street Addre 34 Sweet Bri			
City	et Bilai Lane		State Zip		City	ai Laile	State	Zip
West W	arwick		RI 02893		West Warwic	k	RI	02893
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/19/2021			1,000.00
			In Kind/Other Receipts De	scription				
D 6	77 37		tributor Information	0.00	In 1 37		er Data	
Prefix	First Name Peter	MI C.	Last Name or PAC/Party Committee Name Andolino	Suffix	Employer Na A&M Bronx			
Street A	Address	C.	Alidolillo		Street Addre	_		
	ard Ave				35 Colonial I			
City			State Zip		City		State	Zip
White P	Plains		NY 10605		Mount Verno	n	NY	10550
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/19/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	

Contributor Information Employer Data Last Name or PAC/Party Committee Name Suffix Prefix First Name Employer Name Tami Andolino A&M Bronx Baking, Inc. Street Address Street Address 9 Winward Ave 35 Colonial Place City State Zip City Zip State White Plains NY 10605 NY 10550 Mount Vernon

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Funlar	uon Doto	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		yer Data	
	Lisa		Andoscia	Julia		Consulting Firm		
Street Ac	ldress				Street Addr			
One Rose	ewood Drive				40 Post Offi	ce Park, Ste 100		
City			State Zip		City		State	Zip
North Pro	ovidence		RI 02904		Wilbraham		MA	01095
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts De					
			-	•				
		Cont	ributor Information			Employ	yer Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Mary	J.	Archibald		Providence S			
5 Hickory					Street Addr 797 Westmin			
City	y IXU		State Zip		City	iistei St	State	Zip
North Pro	ovidence		RI 02904		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
110111	Check		Individual		06/21/2021	Deposit Date		200.00
			In Kind/Other Receipts De	scription				
D 6	T1 . N1		ributor Information	0.65	I		yer Data	
	First Name Anthony	MI V.	Last Name or PAC/Party Committee Name Arico	Suffix	Employer N Retired	lame		
Street A	•	٧.	Aico		Street Addr	229		
166 Line					166 Lincoln			
City			State Zip		City		State	Zip
Barringto	on		RI 02806		Barrington		RI	02806
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/22/2021			1,000.00
			In Kind/Other Receipts De	scription				
		~						
Prefix	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N		yer Data	
	John	MII	Arnold	Sumx	Retired	vame		
Street Ac			THIOD		Street Addr	ess		
	y Lane Blvd				2950 Lazy I			
City			State Zip		City		State	Zip
Houston			TX 77019		Houston		TX	77019
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/22/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_					_	
		Cont	ributor Information	0.00		Employ	yer Data	

State

ΤX

Zip 77019

Amold

Prefix First Name

2950 Lazy Lane Blvd

Street Address

City

Houston

Laura

Suffix

Employer Name

Street Address

2950 Lazy Lane Blvd

Zip

77019

State

TX

Retired

City

Houston

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 04/06/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts D	escription				
			ributor Information		T	Employe	er Data	
	First Name Timothy	MI	Last Name or PAC/Party Committee Name Arnold	Suffix	Employer N GreenMed P			
Street Ad			Artiold		Street Addr			
767 East					42 Walnut St			
City			State Zip		City		State	Zip
Scituate			RI 02857		Warwick		RI	02888
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/14/2021	Deposit Date		100.00
			In Kind/Other Receipts D	escription				
			_					
		Cont	ributor Information			Employe	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Tomas		Avila		Not Employ			
Street Ad					Street Addr			
196 Old I	River Rd		a		196 Old Riv	er Rd		-
City			State Zip RI 02865		City		State RI	Zip 02865
Lincoln					Lincoln			
Item	Transaction Type Credit/Debit Card		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/23/2021			25.00
			In Kind/Other Receipts De	escription				
		Conf	ributor Information			Employe	ar Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		1 Data	
	Tomas		Avila		Not Employ			
Street Ad	ldress				Street Addr	ess		
196 Old I	River Rd				196 Old Riv	er Rd		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Lincoln		RI	02865
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/17/2021			250.00
			In Kind/Other Receipts D	escription				
			ributor Information		I	Employe	er Data	
	First Name Joseph	MI W	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame rican Insurance Comp	2001	
Street Ad	•	W	Baglini		Street Addr	_	Jany	
	an Farm Road				500 Enterpri			
City			State Zip		City		State	Zip
Cumberla	and		RI 02864		Rocky Hill		CT	06067
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021	Sepan Date	20	250.00
			In Kind/Other Receipts D	escription				
			•	-				
		Cont	ributor Information			Employe	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	D -1	T	D-14		D D II	T		

R.B. Homes, Inc.

Street Address

State

RI

Zip

02919

42 Shun Pike

City

Johnston

Robert

Street Address

3 Enzo Dr

Coventry

City

J.

Baldwin

State

RI

Zip

02816

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 05/15/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
			·	•				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Robert	J.	Baldwin		R.B. Homes	-		
Street A					Street Addr			
3 Enzo	Dr		St. 1 77		42 Shun Pik	е	64.4	7.
City Covents	v		State Zip RI 02816		City Johnston		State RI	Zip 02919
	-			D	<u> </u>	Danasit Data		ntribution Amount
Item	Transaction Type Check		Contribution Type Individual		04/07/2021	Deposit Date	Co	250.00
	Check		In Kind/Other Receipts De		O I/O // ZOZI			250.00
				P				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Karen	M.	Ballou		Cultivating I	RI, LLC		
Street A					Street Addr			
55 Gree	ne St				536 Atwells	Avenue	_	
City	•		State Zip		City		State	Zip
West W			RI 02893-4532		West Warwi		RI	02893
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Peter		Baptista		Capitol Com	nmunications Group		
Street A	Address				Street Addr	ess		
10 Cou	ntry Meadow Dr				10 Country l	Meadow Dr		
City			State Zip		City		State	Zip
Cransto	n		RI 02921		Cranston		RI	02921
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/19/2021			5.00
			In Kind/Other Receipts De	scription				
		Com	tributor Information			Employe	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		r Data	
Trenx	Anthony	WII	Baro	Sum	E2SOL LLC			
Street A					Street Addr			
10 Don	ance St, Ste 700				10 Dorrance	St, Ste 700		
City			State Zip		City		State	Zip
Provide	nce		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/13/2021			50.00
			In Kind/Other Receipts De	scription				

Employer Data

Zip

02864

State

RI

Contributor Information

Bascombe

S

Prefix First Name

Street Address

Cumberland

City

Ruth

80 West Wrentham Rd

Last Name or PAC/Party Committee Name

State

RI

Zip

02864

Suffix

Employer Name

Street Address

45 Broad St

Cumberland

City

Town of Cumberland

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Con	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		•				т.	D (
Profix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
	Paul	E.	Bastien	Sumx		Auto Sales & Body		
Street Ad	dress				Street Addr	_		
PO Box 5	8				12 Ann & Ho			
City			State Zip		City		State	Zip
Cumberla	nd		RI 02864		Cumberland		RI	02864
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		05/07/2021			100.00
			In Kind/Other Receipts De	scription				
		C	to Tantana Tan Canana di ana			F1	D-4-	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
	James	T.	Beck	Sumx	Retired	ame		
Street Ad					Street Addr	ess		
83 Winter					83 Winterber			
City			State Zip		City		State	Zip
Saunderst	own		RI 02874		Saunderstow	n	RI	02874
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		06/07/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_					.	
Duefer	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
	Lauren	E.	Benoit Committee Name	Sumx	Info Request			
Street Ad					Street Addr			
21 Cargill								
City			State Zip		City		State	Zip
Cumberla	nd		RI 02864					_
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/07/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_						
D C	First Name		tributor Information Last Name or PAC/Party Committee Name	Suffix	FN	Employe	r Data	
	Robert	MI B.	Benoit Committee Name	Sumx	Employer N Anchor Subi			
Street Ad		В.	Belloft		Street Addr			
27 Orion					949 Eddie D			
City			State Zip		City		State	Zip
West Gree	enwich		RI 02817		North Smith	field	RI	02896
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Credit/Debit Card		Individual		06/16/2021			500.00
			In Kind/Other Receipts De	scription				
D 6			tributor Information	0.00	I	Employe	r Data	
Prefix	First Name	\mathbf{MI}	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		

Zip 02828

State

RI

Retired

City

Greenville

Street Address

1 Fair Oaks Ct, S

Zip 02828

State

RI

Linda

Street Address

City

Greenville

1 Fair Oaks Ct, S

Bentz

Contributor Information									
Contributor Information	Item				F	-	Deposit Date	Co	ntribution Amount
Prefix First Name Mil Last Name or PAC/Party Committee Name Berein Engloyer Name Homemaker				In Kind/Other Receipts D	escription	ı			
Prefix First Name Mil Last Name or PAC/Party Committee Name Berein Engloyer Name Homemaker			•				т.	D 4	
Elizabeth Beretta Perik Elizabeth	DC	Einst Name			CCC	FIN		yer Data	
10 High St 10	Frenx		NII		Sumx				
City	Street A	Address				Street Addr	ress		
Item						1			
Transaction Type Contribution Type Individual Contribution Type Individual Contribution Type Contributor Information Contributor Inf	City			State Zip		City		State	Zip
Contributor Information	Jamesto	wn		RI 02835		Jamestown		RI	02835
Contributor Information Employer Data	Item				F	_	Deposit Date	Co	
Contributor Information Employer Data		Check			occuintion				200.00
Prefix First Name Dennis Bernardo				III KIIII/Other Receipts D	escription				
Prefix First Name Dennis Bernardo			Con	tributor Information			Employ	yer Data	
Street Address	Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
171 Old Mendon Rd 172		Dennis		Bernardo		JJ Duffy Fur	neral Home		
City Cumberland State RI Zip O2864 City Cumberland State D2864 Zip O2864 Cumberland RI 02864 Deposit Date D608/2021 Contribution Amount D29608/2021 Deposit Date D2964 Contribution Amount D29608/2021 Deposit D268	Street A	Address				Street Addr	ess		
Cumberland	171 Old	Mendon Rd				757 Mendon	Rd		
Item	•					1 -			-
Credit/Debit Card Individual O6/08/2021 1,000.00	Cumber	land		RI 02864		Cumberland		RI	02864
Contributor Information Employer Data	Item				F	_	Deposit Date	Co	
Contributor Information Employer Data		Credit/Debit Card							1,000.00
Prefix First Name Matthew Bernstein Bernstein Suffix Employer Name DLA Piper Street Address Street Addres				In Kind/Other Receipts D	escription				
Matthew Bernstein DLA Piper Street Address State Zip City State Zip MD 20854 Baltimore MD 21209			Con	tributor Information			Employ	yer Data	
Street Address 10815 Burbank Dr	Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
10815 Burbank Dr		Matthew		Bernstein		DLA Piper			
City City State Zip City State Zip Baltimore MID 21209 Item Transaction Type Check Contribution Type Receipt Date Deposit Date Contribution Amount 200.00 In Kind/Other Receipts Description Employer Data Frefix First Name MI Last Name or PAC/Party Committee Name Suffix Employer Name Michael H Bernstein Street Address 36 Hill Court Street Address 36 Hill Court 36 Hill Court City State Zip Rumford Receipt Date Deposit Date Contribution Amount Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount	Street A	Address				Street Addr	ess		
Potomac MD 20854 Baltimore MD 21209 Item Transaction Type Check Contribution Type Individual Receipt Date 06/09/2021 Deposit Date Contribution Amount 2000.00 In Kind/Other Receipts Description Employer Data Employer Data Prefix First Name Michael MI Last Name or PAC/Party Committee Name Suffix Retired Employer Name Street Address 36 Hill Court State Zip City State Zip Rumford State Zip Aumford RI 02916 Item Transaction Type Contribution Type Feecipt Date Deposit Date Contribution Amount		Burbank Dr				6225 Smith	Ave		
Transaction Type Check Contribution Type Individual Receipt Date Deposit Date Deposit Date Deposit Date Deposit Date Contribution Amount Deposit Date Contribution Amount Deposit Date Deposit Date Contribution Amount Deposit Date Deposit Date Contribution Amount Deposit Date Contribution Amount Deposit Date Deposit Date Contribution Amount Deposit Date Contribution Amount Deposit Date Deposit Date Deposit Date Contribution Amount Deposit Date Deposit Date Deposit Date Deposit Date Contribution Amount Deposit Date Deposit Dat	-								_
Check Individual 06/09/2021 200.00 In Kind/Other Receipts Description Employer Data Prefix First Name Mil Last Name or PAC/Party Committee Name Michael Suffix Retired Employer Name Retired Street Address Street Address Street Address 36 Hill Court 36 Hill Court 36 Hill Court City State Zip City State Zip Rumford RI 02916 Rumford RI 02916 Item Transaction Type Receipt Date Deposit Date Contribution Amount	Potoma	С		MD 20854		Baltimore		MD	21209
In Kind/Other Receipts Description Contributor Information Prefix First Name MI Last Name or PAC/Party Committee Name Michael H Bernstein Street Address 36 Hill Court City State Zip Rumford State Zip Rumford Receipt Date Deposit Date Contribution Type Remployer Data Employer Name Retired Streft Address Street Address 36 Hill Court City State Zip Rumford RI 02916 Receipt Date Deposit Date Contribution Amount	Item	• •			F	•	Deposit Date	Co	
Contributor Information Employer Data		Check							200.00
Prefix First Name MI Last Name or PAC/Party Committee Name Suffix Employer Name Michael H Bernstein Retired Street Address Street Address 36 Hill Court 36 Hill Court City State Zip City State Zip Rumford RI 02916 Item Transaction Type Receipt Date Deposit Date Contribution Amount				In Kind/Other Receipts D	escription				
Prefix First Name MI Last Name or PAC/Party Committee Name Michael H Bernstein Retired Street Address 36 Hill Court City State Zip City State Zip Rumford RI 02916 Rumford RI 02916 Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount			Con	tributor Information			Employ	ver Data	
Michael H Bernstein Retired Street Address Street Address Street Address 36 Hill Court 36 Hill Court City State Zip City State Zip Rumford RI 02916 Rumford RI 02916 Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount	Prefix	First Name			Suffix	Employer N		,	
36 Hill Court City State Zip City State Zip Rumford RI 02916 Rumford RI 02916 Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount		Michael	H	•					
City State Zip City State Zip Rumford RI 02916 Rumford RI 02916 Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount	Street A	Address				Street Addr	ess		
Rumford RI 02916 Rumford RI 02916 Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amou	36 Hill	Court				36 Hill Cour	t		
Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount	City					City		State	Zip
	Rumfor	d		RI 02916		Rumford		RI	02916
Create Death Cara Hidrentian 00/13/2021 30.0	Item	Transaction Type Credit/Debit Card		Contribution Type Individual	F	Receipt Date 06/15/2021	Deposit Date	Co	ntribution Amount 50.00
In Kind/Other Receipts Description		22222222			escription				25.30

Employer Data

Zip

02916

State

RI

Contributor Information

Bernstein

Last Name or PAC/Party Committee Name

State

RI

Zip

02916

Suffix

Employer Name

Street Address

36 Hill Court

Retired

City

Rumford

ΜI

Н

Prefix First Name

Street Address

36 Hill Court

City

Rumford

Michael

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/30/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De	scription				
			tributor Information	~ ~~	I	Employe	r Data	
Prefix	First Name Michael	MI H	Last Name or PAC/Party Committee Name Bernstein	Suffix	Employer N Retired	ame		
Street A	Address	11	Defision		Street Addr	055		
36 Hill					36 Hill Cour			
City			State Zip		City		State	Zip
Rumfor	d		RI 02916		Rumford		RI	02916
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021			250.00
			In Kind/Other Receipts De	scription				
		C	. 7 . 7			. .	D (
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data	
Frenx	William	MII	Bernstein	Sumx	1	of William Berstein		
Street A					Street Addr			
	elton Rd				627 Putnam			
City			State Zip		City		State	Zip
Barring	ton		RI 02806		Greenville		RI	02828
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/18/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		1 Data	
	Richard	В.	Bessette		Retired			
Street A	Address				Street Addr	ess		
125 We	st Road				125 West Ro	ad		
City			State Zip		City		State	Zip
Cumber	land		RI 02864		Cumberland		RI	02864
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/10/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Richard		Bessette	Jr.	Berkley Des	ign Co, LLC		
Street A	Address				Street Addr	ess		
8 N. He	reford Dr				8 N. Herefor	d Dr		
City			State Zip		City		State	Zip
Cumber			RI 02864		Cumberland		RI	02864
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/23/2021			500.00
			III KIIIa/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	

State

RI

Zip

02818

Bibby

Suffix

Employer Name

Street Address 80 Birchwood Way

East Greenwich

City

AlphaCentric Advisors

State

RI

Zip

02818

Prefix First Name

Jill

Street Address

East Greenwich

City

80 Birchwood Way

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 05/19/2021	Deposit Date	Con	ntribution Amount
			In Kind/Other Receipts De					
		Conti	ributor Information			Employer	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Dennis	J.	Bigelow		A1 Custom A	-		
	Address				Street Addre			
58 Starr	r Lane				2244 Pawtucl	cet Ave		
City	a.		State Zip		City		State	Zip
Rehobo	th		MA 02769		East Provider	ice	RI	02914
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/15/2021			1,000.00
			In Kind/Other Receipts De	scription				
		.					. .	
D 6	T1 . 31		ributor Information	0.00	I	Employer	r Data	
Prefix	First Name Seth	MI H.	Last Name or PAC/Party Committee Name Bock	Suffix	Employer Na Greenleaf	ıme		
S44 A	Address	п.	DOCK		Street Addre			
	Anaress tview Dr				1637 W. Mair			
City	iview Di		State Zip		City	i Ku	State	Zip
Portsmo	outh		RI 02871		Portsmouth		RI	02871
					<u> </u>	D '(D)		
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 300.00
	CHCCK		In Kind/Other Receipts De		00/21/2021			300.00
			III Kiliu/Other Receipts De	scription				
		Contr	ributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Henry	R.	Boeniger		Green Develo			
Street A	Address				Street Addre	ss		
14 Dani	ielle Ave				2000 Chapel	View Blvd, Ste 500		
City			State Zip		City		State	Zip
Westerl	y		RI 02891		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021	•		250.00
			In Kind/Other Receipts De	scription				
		Contr	ributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Jeffrey	E.	Bogosian		Winchester S	ecurities		
Street A	Address				Street Addre	SS		
28 Delta	a Dr				127 Dorrance	St		
			State Zip		City		State	Zip
City			RI 02874		Providence		RI	02903
City Saunder	rstown							
-	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/15/2021	Deposit Date	Co	ntribution Amount 25.00
Saunder	Transaction Type		Contribution Type			Deposit Date	Co	
Saunder	Transaction Type		Contribution Type Individual			Deposit Date	Con	
Saunder	Transaction Type	Contr	Contribution Type Individual			Deposit Date Employer		

State

RI

Zip 02891

Bond

Bond Painting Inc

State

RI

Zip

02891

Street Address

39 Hobart St

City

Westerly

Street Address

39 Hobart St

City

Westerly

Paul

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/19/2021	Deposit Date	Ca	ntribution Amount 25.00
			In Kind/Other Receipts De	scription				
		C	4			Fundam	D.4.	
Prefix Fir	est Namo	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
All		WII	Booth	Sum	Not Employ			
Street Addr	ess				Street Addr			
PO Box 311					PO Box 311			
City			State Zip		City		State	Zip
Newport			RI 02840		Newport		RI	02840
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/30/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	ou Doto	
Prefix Fir	rst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ Jame	er Data	
	urie		Bosio		LB Strategie			
Street Addr	ess				Street Addr	ess		
4 Cedar Vall	ey Way				PO Box 365	7		
City			State Zip		City		State	Zip
Little Compt	ton		RI 02837		Westport		MA	02790
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/29/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix Fir	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Jef	frey	A .	Bostock		Aetna Bridg	e Company		
Street Addr					Street Addr			
11 Winsor D	r				100 Jfferson	Blvd., Ste 100		
City			State Zip		City		State	Zip
North Attleb			MA 02760		Warwick		RI	02888
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		05/14/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix Fir	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Ras	ndy		Bottella		Reliable Col	llision		
Street Addr	ess				Street Addr	ress		
31 Hoover S	t				24 Begonia	St		
City			State Zip		City	_	State	Zip
West Warwig			RI 02893		West Warwi		RI	02893
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Pessints De		04/15/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	

MI

Bourque

Last Name or PAC/Party Committee Name

State

MA

Zip 02703

Suffix

Employer Name

Street Address

Zip 02703

State

MA

10 Sunset Rd

Retired

City

Attleboro

Prefix First Name

Street Address

10 Sunset Rd

City

Attleboro

Catherine

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/29/2021	Deposit Date	Ca	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employer	r Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Winifred	M.	Bourque		Retired			
PO Box 3					PO Box 3026			
City			State Zip		City		State	Zip
Attleboro)		MA 02703-0906		Attleboro		MA	02703-0906
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/18/2021			100.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employer	r Data	
	First Name Paul	MI	Last Name or PAC/Party Committee Name Bradley	Suffix	Employer N Medicasoft	ame		
Street Ac	ldress				Street Addre	ess		
19 Dougl	as Dr				2300 Clarend	lon Blvd Suite 300		
City			State Zip		City		State	Zip
Cumberla	and		RI 02864		Arlington		VA	22201
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021			500.00
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	Ralph		Branca	Suma	RJB Properti			
Street Ad	-				Street Addre			
3971 Dia	mond Hill Road				640 George V	Washington Hwy		
City			State Zip		City		State	Zip
Cumberla	and		RI 02864		Lincoln		RI	02865
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/17/2021	•		70.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer	r Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Robert		Branchaud		1	nagement Co, LLC		
Street Ad					Street Addre			
	etland Ln		~ ~.		1	ny Drive, Suite 320		~ .
City	L		State Zip		City		State	Zip
Loxahatc			FL 33470		Madison		WI	53719
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 50.00
	CHCR		In Kind/Other Receipts De		C St LAI LVL I			30.00
			In Mills Other Receipts De	Seription				
		Cont	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		2	
		E	D			4. T.1		

State of Rhode Island Street Address

State

RI

Zip

02903

82 Smith St

Providence

City

E.

Bray

State

RI

Zip

02860-2711

Mary

Street Address 7 Cooper St

City

Pawtucket

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/08/2021	Deposit Date	Co	ntribution Amoun 1,000.00
			In Kind/Other Receipts De	scription				
		~						
D 6	T' 4 N		tributor Information	0.00	I	Employe	r Data	
Prefix	First Name James	MI E.	Last Name or PAC/Party Committee Name Bridge	Suffix	Employer Na Info Requests			
C44 /	Address	L.	Bridge		Street Addre			
	Andress rrow Lane				Street Addre	ess		
	now Lane		S4-4- 7'-		6:4		64-4-	7:
City Charles	torre		State Zip RI 02813		City		State	Zip
Charles					l .			
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/17/2021			250.00
			In Kind/Other Receipts De	scription				
		_						
D ~	T1 . 31		tributor Information	0 00	In	Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Julie		Brown-Haworth		1	ed Entrepreneur		
	Address				Street Addre	ess		
21st Str	reet				21st Street		_	
City			State Zip		City		State	Zip
Barring	ton		RI 02806		Barrington		RI	02806
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/03/2021			250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Bruce	J.	Bryan		Retired			
Street A	Address				Street Addre	ess		
6 Tower	r View Ct				6 Tower View	v Ct		
City			State Zip		City		State	Zip
Narraga	ansett		RI 02882-2833		Narragansett		RI	02882-2833
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/02/2021			250.00
			In Kind/Other Receipts De	scription				
			_	_				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame		
	Thomas	A .	Bucci		Law Office o	f Thomas A. Bucci		
Street A	Address				Street Addre	ess		
200 Ho	ffman Ave, Apt 303				373 Elmwoo	d Ave		
City			State Zip		City		State	Zip
Cransto	n		RI 02920		Providence		RI	02907
Item	Transaction Type		Contribution Type	10	eceipt Date	Deposit Date	Co	ntribution Amoun
Z (CIII	Credit/Debit Card		Individual		06/15/2021	Deposit Date	Cu	25.00
			In Kind/Other Receipts De					25.00
			in Kind Other Receipts De	puon				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
cma	Michael	.,,,,,	Burk	Junia	State of RI			

Zip 02878

State

RI

Street Address

82 Smith Street

Providence

City

Zip 02903

State

RI

Street Address

67 Durfee Rd

City

Tiverton

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 04/12/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
D 6 1	E M		tributor Information	0.65	I	Employ	er Data	
	First Name Joseph	MI P.	Last Name or PAC/Party Committee Name Cain	Suffix III	Employer N BDO USA, I			
Street Ad	•	1.	Can	111	Street Addr			
	Millcreek Rd				339 6th Ave,			
City			State Zip		City		State	Zip
Hookstow	'n		PA 15050-1429		Pittsburgh		PA	15222
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/06/2021			1,000.00
			In Kind/Other Receipts De	scription				
			. T. C			F 1	D 4	
Prefix 1	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	Jason	D.	Calderon	Sum	Bonsai Buds			
Street Ad	dress				Street Addr	ess		
40 Winson	r Ave				1150 Oaklav	vn Ave		
City			State Zip		City		State	Zip
North Kin	gstown		RI 02852		Cranston		RI	02920
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		05/08/2021			1,000.00
			in Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix 1	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
I	David	A.	Caldwell		Caldwell &	Johnson, Inc.		
Street Ad					Street Addr			
_	iidnessett Rd		a		6500 Post R	d, #5	~	
City North Kin	agetown		State Zip RI 02852-1840		City North Kings	tourn	State RI	Zip 02852
	-							
Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 06/17/2021	Deposit Date	Co	ntribution Amount
	Oncor		In Kind/Other Receipts De		00,11,2021			200.00
		Con	tributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Teanette	E.	Calise		Retired			
Street Ad					Street Addr			
8404 Log	ia Circle		S4-4- 7:-		8404 Logia	Circle	64-4-	7:-
City Boynton I	Beach		State Zip FL 33472-7110		City Boynton Bea	ach	State FL	Zip 33472-7110
					,	Deposit Date		ntribution Amount
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt Date 06/24/2021	Dehozit Date	Co	25.00
			In Kind/Other Receipts De					25.00
				•				
		Con	tributor Information			Employ	er Data	

State

RI

Zip 02842

Callaghan

Suffix

Employer Name

Street Address

City

Newport

181 Bellevue Ave

Bellevue WIne and Spirits

State

RI

Zip

02840

Prefix First Name

Street Address

21 South Dr

Middletown

City

John

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/15/2021	Deposit Date	Co	ntribution Amoun 200.00
			In Kind/Other Receipts De	scription				
							D (
Duefer	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
rrenx	Matthew	F.	Callaghan	Jr.		vaine of Matthew F. Callagh	nan. Jr.	
Street A	Address				Street Addr	_	,	
3 Brown	n St				3 Brown St			
City			State Zip		City		State	Zip
Wickfor	rd .		RI 02852		Wickford		RI	02852
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual In Kind/Other Receipts De		04/18/2021			500.00
			In Kind Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Vame		
	Ronald	J.	Caniglia		Stand Corpo	oration		
Street A					Street Addr			
	nquid Dr		S		105 Pennsyl	vanıa Ave	G	7.
City Warwic	k		State Zip RI 02888		City Warwick		State RI	Zip 02888
					<u> </u>	D 2/D /		
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 04/06/2021	Deposit Date	Co	ntribution Amoun 1,000.00
			In Kind/Other Receipts De					
			•	•				
		Con	tributor Information			Employe	r Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		11.11.0	
S44 /	Michael	В.	Capalbo		Street Addr	ntal Group of Wakefie	ela, LLC	
Street A					29 Updike A			
City			State Zip		City		State	Zip
Westerl	y		RI 02891		North Kings	stown	RI	02852
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		05/19/2021			250.00
			In Kind/Other Receipts De	escription				
		~						
Prefix	First Name	Con MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
rienx	Karen	A.	Capaldi-Quattrocchi	Sumx	1	vame nstruction Works, Inc.		
Street A	Address				Street Addr			
61 Hun	ters Run				37F Lark Inc	dustrial Pkwy		
City			State Zip		City		State	Zip
North P	rovidence		RI 02904-3052		Greenville		RI	02828
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/26/2021			200.00
			In Kind/Other Receipts De	escription				
		Com	In Kind/Other Receipts De tributor Information	escription		Employe	r Data	

Prefix First Name

Street Address

163 Wendell St

Providence

City

Miguel

MI

A.

Capellan

Last Name or PAC/Party Committee Name

State

RI

Zip 02909

Suffix

Employer Name

Street Address

410 S. Main St

Providence

City

Local 271 Laborers

State

RI

Zip

02903

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 250.00
			In Kind/Other Receipts De	scription				
		Contr	ibutor Information			Employ	on Doto	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
TICHA	Karen	A.	Cappelli	Julia	Retired			
Street A	Address				Street Addr	ess		
151 Bor	rden Ave				151 Borden	Ave		
City			State Zip		City		State	Zip
Johnston	n		RI 02919		Johnston		RI	02919
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 500.00
	Check		In Kind/Other Receipts De		00/23/2021			300.00
			P 10 20					
		Contr	ibutor Information			Employ	er Data	
Prefix	First Name		Last Name or PAC/Party Committee Name	Suffix	Employer N			
_	Joyce	E.	Caprio		Homemaker			
Street A					Street Addr			
545 Oce	ean Kd		St-4- 7'-		545 Ocean F	Cd	64-4-	7:-
City Narraga	nsett		State Zip RI 02882		City Narragansett		State RI	Zip 02882
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 05/31/2021	Deposit Date	Co.	ntribution Amount 750.00
			In Kind/Other Receipts De					
			-	•				
		Contr	ibutor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
C44 A	Ramon		Cardena		Global Star			
Street A	estminster St				Street Addr 1955 Westm			
City	csimilater of		State Zip		City	mster of	State	Zip
Provider	nce		RI 02909		Providence		RI	02909
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/19/2021	•		1,000.00
			In Kind/Other Receipts De	scription				
			ibutor Information			Employ	er Data	
Prefix	First Name	MI B.	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street A	Antonio	В.	Cardi		Cardi Corpo Street Addr			
88 Varn					400 Lincoln			
City			State Zip		City		State	Zip
East Gre	eenwich		RI 02818-2023		Warwick		RI	02888
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/17/2021			1,000.00
			In Kind/Other Receipts De	scription				
						Employ		

A.

Cardi

Prefix First Name

Street Address

East Greenwich

25 Devon Ct

City

Rose

Last Name or PAC/Party Committee Name

State

RI

Zip

02818

Suffix

Employer Name Cardi Corporation

Street Address

City

Warwick

400 Lincoln Ave

Zip 02888

State

RI

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 05/19/2021	Deposit Date	Con	ntribution Amount 750.00
			In Kind/Other Receipts De	scription				
		_						
D C	First Name		tributor Information	Suffix	F N	Employ	er Data	
Prenx	Stephen	MI A.	Last Name or PAC/Party Committee Name Cardi	Sumx	Employer N Cardi Corpor			
Street A	Address				Street Addr			
45 Burn					400 Lincoln			
City			State Zip		City		State	Zip
East Gr	eenwich		RI 02818		Warwick		RI	02888
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		06/08/2021			250.00
			In Kind/Other Receipts De	scription				
		-						
D. C	T2' 4 NI		tributor Information	C CC	le i v	Employ	er Data	
Prefix	First Name Bette	MI M.	Last Name or PAC/Party Committee Name Carlone	Suffix	Employer N Retired	ame		
Street A	Address	IVI.	Carlone		Street Addr	955		
PO Box					PO Box 594			
City			State Zip		City		State	Zip
Narraga	ansett		RI 02882-0594		Narragansett		RI	02882
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			250.00
			In Kind/Other Receipts De	scription				
D C	E' AN		tributor Information	C CC	le i v	Employ	er Data	
Prefix	First Name David	MI J.	Last Name or PAC/Party Committee Name Carty	Suffix	Employer N Carty Realty			
Street A	Address	٥.	Carry		Street Addr			
	onchet Way				128 Boon St			
City			State Zip		City		State	Zip
Narraga	ansett		RI 02882		Narragansett		RI	02882
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
			tributor Information	~ **	I =	Employ	er Data	
-		MI D.	Last Name or PAC/Party Committee Name Caruolo	Suffix	Employer N			
Prefix	C	υ.	Caruolo		Street Addr	olo Law Offices		
	George					622		
Street A	Address				I	lve		
Street A			State Zin		670 Willett A	Ave	State	Zip
Street A 670 Wil	Address		State Zip RI 02915		I		State RI	Zip 02915
Street A 670 Wil City	Address Elett Ave		RI 02915	R	670 Willett A	nce	RI	
Street A 670 Wil City East Pro	Address Llett Ave		-		670 Willett A City East Provide		RI	02915
Street A 670 Wil City East Pro	Address llett Ave ovidence Transaction Type		RI 02915 Contribution Type		670 Willett A City East Provide	nce	RI	02915 ntribution Amount
Street A 670 Wil City East Pro	Address llett Ave ovidence Transaction Type		RI 02915 Contribution Type Individual		670 Willett A City East Provide	nce	RI	02915 ntribution Amount

State

RI

Zip

02921

Suffix

Employer Name

Street Address

51 South St

Cranston

City

American Jail Consultant

State

RI

Zip

02920

ΜI

A.

Caruso

Prefix First Name

Street Address

37 Castleton Dr

City

Cranston

David

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	06/14/2021		1,000.00
		In Kind/Other Receipts	Description		

		Con	tributor Information		Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Philip		Casacalenda	Jr.	West Warwick Auto Body		
Street A	ddress				Street Address		
93 Tiog	ue Ave				93 Tiogue Ave		
City			State Zip		City	State	Zip
West Wa	arwick		RI 02893		West Warwick	RI	02893
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021		1,000.00

		P		
Cont	ributor Information			Employer Data
MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
G.	Casale		Casale's Auto Body	
			Street Address	
			0741 TT +C 1 A	

Thomas Casale Street Address 330 Seven Mile Rd 2741 Hartford Ave City State Zip City State Zip 02831 02919 Hope RI Johnston RI Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount 06/14/2021 Check Individual 1,000.00

Prefix

First Name

In Kind/Other Receipts Description

		Con	tributor Information		Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name				
	Victoria	L.	Casale		Casale's Auto Body				
	Address ven Mile Rd				Street Address 2741 Hartford Ave				
City			State Zip		City	State	Zip		
Hope			RI 02831		Johnston	RI	02919		
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount		
	Check		Individual		06/21/2021		200.00		

In Kind/Other Receipts Description

		Con	tributor Information		Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Francis	P.	Castrovillari		Law Office of Francis P. Castrovil	lari	
Street A	Address				Street Address		
60 Starr	Dr				60 Starr Dr		
City			State Zip		City	State	Zip
Narraga	nsett		RI 02882-3149		Narragansett	RI	02882-3149
Item	Transaction Type		Contribution Type		Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/09/2021		1,000.00

In Kind/Other Receipts Description

		Con	Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Com	mittee Name Su	uffix	Employer Name		
	Joseph	L.	Catelli			Shoreline Properties, Inc.		
Street A	Address					Street Address		
400 Sou	th County Trail, Ste A207					152 Naples Ave		
City		State	Zip		City	State	Zip	
Exeter		RI	02822		Warwick	RI	02886	

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Con	ntribution Amoun 200.00
			In Kind/Other Receipts De	scription				
D. C	First Name		tributor Information	C .CC	I E . I N	Employ	er Data	
Prenx	Reginald	MI A	Last Name or PAC/Party Committee Name Centracchio	Suffix	Employer N Retired	ame		
Street A	_		Centucent		Street Addr	ess		
	Plainfield Pike				342 Old Plai			
City			State Zip		City		State	Zip
Foster			RI 02825		Foster		RI	02825
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amoun
	Check		Individual		06/03/2021			250.00
			In Kind/Other Receipts De	scription				
							_	
D. C	To AN		tributor Information	C . CC	l	Employ	er Data	
Prefix	First Name Karen	MI M.	Last Name or PAC/Party Committee Name Cesaro	Suffix	Employer N L & K Prope			
Street A		IVI.	Cesalo		Street Addr			
32 Wick					3633 Long I			
City			State Zip		City		State	Zip
North K	ingstown		RI 02852		Long Beach		CA	90807
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amoun
	Check		Individual		06/09/2021	_		250.00
			In Kind/Other Receipts De	scription				
D 6	T1 4 N		tributor Information	0.00	I	Employ	er Data	
Prefix	First Name Kenneth	MI S.	Last Name or PAC/Party Committee Name Cesaro	Suffix	Employer N	ame idential Mortgage		
Street A		J.	CCSALO		Street Addr			
32 Wick					647 Oaklaw			
City			State Zip		City		State	Zip
North K	ingstown		RI 02852		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amoun
	Credit/Debit Card		Individual		06/01/2021	_		500.00
			In Kind/Other Receipts De	scription				
			-	scription				
			tributor Information	-		Employ	er Data	
Prefix	First Name	Con	tributor Information Last Name or PAC/Party Committee Name	scription Suffix	Employer N	ame	er Data	
	Arnold		tributor Information	-	Cornish Ass	lame ociates	er Data	
Street A	Amold .ddress		tributor Information Last Name or PAC/Party Committee Name	-	Cornish Ass Street Addr	ame ociates ess	er Data	
Street A	Amold .ddress		tributor Information Last Name or PAC/Party Committee Name Chace	-	Cornish Ass Street Addr 46 Aborn St	ame ociates ess		Zip
Street A	Arnold address n St		tributor Information Last Name or PAC/Party Committee Name	-	Cornish Ass Street Addr	ame ociates ess	er Data State RI	Zip 02903
Street A 45 Abon City	Arnold address n St		tributor Information Last Name or PAC/Party Committee Name Chace State Zip	Suffix	Cornish Ass Street Addr 46 Aborn St City Providence	ame ociates ess	State RI	_
Street A 45 Abor City Provider	Arnold address n St		tributor Information Last Name or PAC/Party Committee Name Chace State Zip RI 02903	Suffix	Cornish Ass Street Addr 46 Aborn St City	ame ociates ess	State RI	02903
Street A 45 Abor City Provider	Arnold address in St ince Transaction Type		tributor Information Last Name or PAC/Party Committee Name Chace State Zip RI 02903 Contribution Type	Suffix	Comish Ass Street Addr 46 Aborn St City Providence eccipt Date	ame ociates ess	State RI	02903 ntribution Amoun
Street A 45 Abor City Provider	Arnold address in St ince Transaction Type		tributor Information Last Name or PAC/Party Committee Name Chace State Zip RI 02903 Contribution Type Individual	Suffix	Comish Ass Street Addr 46 Aborn St City Providence eccipt Date	ame ociates ess	State RI Co	02903 ntribution Amoun

State

RI

Zip

02817

Suffix

Employer Name

Street Address

112 Amherst Rd

Sunderland

State

MA

Zip

01375

City

Tri State Materials

MI

Chagnon

Prefix First Name

Street Address

West Greenwich

City

Richard

8 Pine Grove Lane, Unit 8

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/08/2021	Deposit Date	Con	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		_					_	
D C E			tributor Information	C .CC	I E I N	Employe	er Data	
Prefix Fi	irst Name hristopher	MI P.	Last Name or PAC/Party Committee Name Chantre	Suffix	Employer N Overhead Do	ame oor Company of Prov	ridence	
Street Add	_				Street Addre	• •		
155 Ashley					1 Overhead V			
City			State Zip		City		State	Zip
Cranston			RI 02920		Warwick		RI	02888-1755
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/27/2021			25.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	ar Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		el Data	
	intou		Chatterton		Chatterton Ir			
Street Add	ress				Street Addre	ess		
99 Jay Stree	et				150 Main St			
City			State Zip		City		State	Zip
Rumford			RI 02916		Pawtucket		RI	02860
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Credit/Debit Card		Individual		06/28/2021			100.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	ar Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		1 Data	
Da	aryl		Chelo			communications		
Street Add	ress				Street Addre	ess		
9 Hunters K	Knoll				1 Albion Rd			
City			State Zip		City		State	Zip
Smithfield			RI 02917		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/29/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix Fi	irst Name	Con MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	irst Name avid			Suffix			er Data	
	avid	MI	Last Name or PAC/Party Committee Name	Suffix		ame urers Association	er Data	
Da	avid ress	MI	Last Name or PAC/Party Committee Name	Suffix	RI Manufact	ame urers Association	er Data	
Da Street Add 1 Thomas I City	avid ress Or	MI	Last Name or PAC/Party Committee Name Chenevert State Zip	Suffix	RI Manufact Street Addre 2 Douglas Pi City	ame urers Association	State	Zip
Da Street Add 1 Thomas I	avid ress Or	MI	Last Name or PAC/Party Committee Name Chenevert	Suffix	RI Manufact Street Addre 2 Douglas Pi	ame urers Association		Zip 02917-2380
Da Street Add 1 Thomas I City	avid ress Or	MI	Last Name or PAC/Party Committee Name Chenevert State Zip	R	RI Manufact Street Addre 2 Douglas Pi City	ame urers Association	State RI	_

Employer Data

State

RI

Zip

02861

Contributor Information

Chenevert

Last Name or PAC/Party Committee Name

State

RI

Zip

02861

Suffix

Employer Name

Street Address

402 Grand Ave

Pawtucket

Retired

City

ΜI

V.

Prefix First Name

Street Address

402 Grand Ave

City

Pawtucket

Jeannette

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/17/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	n Data	
Prefix Fir	est Namo	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
	nnette	V.	Chenevert	Sum	Retired	ame		
Street Addr	ess				Street Addr	ess		
402 Grand A					402 Grand A			
City			State Zip		City		State	Zip
Pawtucket			RI 02861		Pawtucket		RI	02861
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			250.00
			In Kind/Other Receipts De	scription				
		C	4			F	D-4-	
Prefix Fir	rst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Tin		M.	Cherenzia	Sumx	Gencarella F			
Street Addr					Street Addr			
28 Ashaway					3 Knollwood			
City			State Zip		City		State	Zip
Westerly			RI 02891		Westerly		RI	02891
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	n Data	
Prefix Fir	rst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		r Data	
Lo		A.	Chirico			Veterinary Specialists	5	
Street Addr	ess				Street Addr	ess		
349 Howard	Ave				1480 South	County Trail		
City			State Zip		City		State	Zip
Hope			RI 02831		East Greenw	vich	RI	02818
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/12/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Com	tributor Information			Employe	Data	
Prefix Fir	rst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		r Data	
Joh		A.	Chopoorian	Summa		rsing & Rehabilitatio	n Center	
Street Addr	ess		•		Street Addr			
145 Prospect	t Farm Rd				104 Clay Str	reet		
City			State Zip		City		State	Zip
Portsmouth			RI 02871		Central Falls	s	RI	02863
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/15/2021			1,000.00
			In Kind/Other Receipts De	scription				
		•	tributor Information			Employe	D-4-	

M.

Clarke

Last Name or PAC/Party Committee Name

State

RI

Zip 02879

Suffix

Employer Name

Street Address

222 Windmill Dr

Zip 02879

State

RI

Retired

City

Wakefield

Prefix First Name

Street Address

222 Windmill Dr

City

Wakefield

Steven

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/28/2021	Deposit Date	Co	ntribution Amount
	0.000.000.000		In Kind/Other Receipts De					25100
			-	_				
			tributor Information			Employ	er Data	
Prefix	First Name Alice	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
C44 A			Clemente		Not Employ			
Street A Box 777					Street Addr Box 7771	ess		
City	•		State Zip		City		State	Zip
Cumber	land		RI 02864		Cumberland	ı	RI	02864
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021	-		200.00
			In Kind/Other Receipts De	scription				
D . 7	T1 NT		tributor Information	0.00	In	Employ	er Data	
Prefix	First Name Sean	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N Burns & Lev			
Street A			Coffey		Street Addr			
123 Ben					1	laza, Ste 1100		
City			State Zip		City		State	Zip
Provide	nce		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			250.00
			In Kind/Other Receipts De	scription				
						F 1	D 4	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Tienx	Anthony	W.	Cofone	Sum		McNamara & Cofon	e, P.C.	
Street A	•				Street Addr			
434 Sea	side Dr				1177 Greenv	wich Avenue		
City			State Zip		City		State	Zip
Jamesto	wn		RI 02835		Warwick		RI	02886
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			45.00
			In Kind/Other Receipts De	scription				
		Com	tributor Information			Familia	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	1 0	er Data	
110111	Llewellyn		Cole	Julia		Youth Leadership Fo	undation	
Street A	ddress				Street Addr	ess		
131 For	dson Ave				131 Fordson	Ave		
City			State Zip		City		State	Zip
Cranston	n		RI 02910		Cranston		RI	02910
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/28/2021			200.00
			In Kind/Other Receipts De	scription				
		Com	tributor Information			Fuele	er Data	
		Con	II IOUTOI IIIIOI IIIAUOII			Employ	er Data	

J.

Collins

Last Name or PAC/Party Committee Name

State

RI

Zip 02865

Suffix

Employer Name

Street Address

City

Providence

The Miriam Hospital

164 Summit Avenue

State

RI

Zip

02906

Prefix First Name

Street Address

City

Lincoln

4 Christian Court

Bradley

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Con	ntribution Amount 25.00
			In Kind/Other Receipts De	scription				
		_					_	
Prefix F	2° 4 N		tributor Information	C .CC	I E I N	Employe	er Data	
	orst Name Dylan	MI B.	Last Name or PAC/Party Committee Name Conley	Suffix	Employer N	of William Conley		
Street Add			- Come,		Street Addr	-		
82 Dexter					123 Dyer St			
City			State Zip		City	•	State	Zip
Providence	e		RI 02909		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/21/2021			250.00
			In Kind/Other Receipts De	scription				
		-	4-'l4 If			F 1	D. 4	
Prefix F	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data	
	Oylan	B.	Conley	Sumx		of William Conley		
Street Add	•	ъ.	Comey		Street Addr			
82 Dexter					123 Dyer St			
City			State Zip		City	•	State	Zip
Providence	e		RI 02909		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix F	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		2	
V	Villiam	J	Conley		William J Co	onley Law Offices		
Street Add	dress				Street Addr	ess		
3 Bridghan	m Ct				670 Willett A	Ave		
City			State Zip		City		State	Zip
Rumford			RI		Riverside		RI	
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		04/21/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix F	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	1 1		
Jo	ohn	K.	Cooper		Ferland Corp	poration		
Street Add	dress				Street Addr	ess		
38 Jackson	ı St				558 Smithfie	eld Ave		
City			State Zip		City		State	Zip
Attleboro l	Falls		MA 02763		Pawtucket		RI	02680
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Credit/Debit Card		Individual		06/18/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
		Con				Zimpitoy		

R.

Coppola

Last Name or PAC/Party Committee Name

State

RI

Suffix

Zip 02886-3143

Employer Name

Street Address

West Warwick

City

1350 Division Rd

Ivy Wealth Management

Zip 02893

State

RI

Prefix First Name

Street Address

229 Burt St

City

Warwick

Ralph

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 06/22/2021	Deposit Date	Co	ntribution Amount 1,000.00
	Credit Devit Card		In Kind/Other Receipts De		00/22/2021			1,000.00
		C	4-11-4 I-6			F	D.4.	
Prefix F	ïrst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	г Дата	
	arah	.,	Cornwell	34111	Gamble Gard			
Street Add	lress				Street Addr	ess		
2914 Emer	rson St				1431 Waverl	ey Street		
City			State Zip		City		State	Zip
Palo Alto			CA 94306		Palo Alto		CA	94301
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		04/13/2021			100.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employe	r Data	
	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	'arl	D.	Corrow		1	ye Care Associates		
Street Add					Street Addr			
	Meadow Rd		a		780 North M	am St		
City			State Zip RI 02806		City Providence		State	Zip 02904
Barrington							RI	
Item	Transaction Type		Contribution Type		eceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amount
	Check		Individual		00/10/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix F	irst Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
D	David	A .	Corsetti		Premiere De			
Street Add	lress				Street Addr	ess		
56 Pine St,	3rd F1				56 Pine St, 3	rd Fl		
Joi me St,			State Zip		City		State	Zip
-			State Zip		City			02903
City Providence	•		RI 02903		Providence		RI	02903
City	Transaction Type		_	R		Deposit Date		
City Providence			RI 02903		Providence	Deposit Date		ntribution Amount
City Providence	Transaction Type		RI 02903 Contribution Type		Providence eceipt Date	Deposit Date		ntribution Amount
City Providence	Transaction Type		RI 02903 Contribution Type Individual		Providence eceipt Date	Deposit Date		ntribution Amount
City Providence Item	Transaction Type Check		RI 02903 Contribution Type Individual In Kind/Other Receipts De	scription	Providence eccipt Date 06/09/2021	Employe	Con	ntribution Amount
City Providence Item	Transaction Type Check irst Name	MI	RI 02903 Contribution Type Individual In Kind/Other Receipts De tributor Information Last Name or PAC/Party Committee Name		Providence leceipt Date 06/09/2021	Employe	Con	ntribution Amount
City Providence Item Prefix F	Transaction Type Check First Name		RI 02903 Contribution Type Individual In Kind/Other Receipts De	scription	Providence seceipt Date 06/09/2021 Employer N Building Fut	Employe ame ures	Con	ntribution Amount
City Providence Item Prefix F A Street Add	Transaction Type Check First Name Andrew Bress	MI	RI 02903 Contribution Type Individual In Kind/Other Receipts De tributor Information Last Name or PAC/Party Committee Name	scription	Providence deceipt Date 06/09/2021 Employer N Building Fut Street Addres	Employe ame ures	Con	ntribution Amount
City Providence Item Prefix F	Transaction Type Check First Name Andrew Bress	MI	RI 02903 Contribution Type Individual In Kind/Other Receipts De tributor Information Last Name or PAC/Party Committee Name	scription	Providence seceipt Date 06/09/2021 Employer N Building Fut	Employe ame ures	Con	ntribution Amount

	Contributor Information Employer Da								
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name				
	Andrew	L.	Cortes		Building Futures				
Street A	Address				Street Address				
102 Fan	num Pike				1 Acorn St				
City			State Zip		City	State	Zip		
Smithfie	eld		RI 02917		Providence	RI	02903		
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount		
	Credit/Debit Card		Individual		06/14/2021		25.00		

In Kind/Other Receipts Description

		Cont	tributor Information			Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Con	amittee Name Su	ıffix	Employer Name			
	Marcia	F.	Costa			VNA of CNE			
Street A	ddress					Street Address			
92 Cent	ral Avenue					51 Health Lane			
City			State	Zip		City	State	Zip	
Pawtuck	cet		RI	02860		Warwick	RI	02886	

Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 04/20/2021	Deposit Date	Co	ntribution Amount 500.00
	Cincon		In Kind/Other Receipts De					
			ributor Information		T	Employe	er Data	
Prefix	First Name David	MI O.	Last Name or PAC/Party Committee Name Costantino	Suffix	Employer N Cosco, Inc.	ame		
Street A		O.	Costantino		Street Addr	220		
7 S. Clif					707 Park Ea			
City			State Zip		City		State	Zip
Narraga	nsett		RI 02882-1914		Woonsocket		RI	02895
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/04/2021			500.00
			In Kind/Other Receipts De	scription				
		C	The tar I for any time			т.	D(
Prefix	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data	
Trenx	David	Ο.	Costantino	Sum	Cosco, Inc.	ame		
Street A	Address				Street Addr	ess		
7 S. Cli	ff Dr				707 Park Eas	st Dr		
City			State Zip		City		State	Zip
Narraga	nsett		RI 02882-1914		Woonsocket		RI	02895
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual In Kind/Other Receipts De		06/03/2021			5.00
			III Kiliu/Other Receipts De	scription				
		Cont	ributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Daniel		Costello		American U	niversity - Student		
Street A					Street Addr			2004.5
5 Brett 1	Dr		a			chusetts Ave N, Wash		
City Foster			State Zip RI 02825		City Washington		State DC	Zip 20016
	T (' T					D '/D /		
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200 00
	Chica		In Kind/Other Receipts De		00/21/2021			200.00
				•				
		Cont	ributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Jessica	W.	Cotton			cal Marijuana Evalua	tion Center	ī
Street A					Street Addr			
286 Col	lins Kd		S4-4- 7:		300 Tollgate	- Kd	64-4-	7:-
City Ashawa	v		State Zip RI 02804		City Warwick		State RI	Zip 02886
	Transaction Type		Contribution Type	ъ	eceipt Date	Deposit Date		ntribution Amount
Item	Check		Contribution Type Individual		05/13/2021	Depusit Date	Co	500.00
			In Kind/Other Receipts De					200.30
			•	•				
		Cont	ributor Information			Employe	er Data	

MI

R.

Cournoyer

Last Name or PAC/Party Committee Name

State

RI

Zip 02895

Suffix

Employer Name

Street Address

303 Rhodes Ave

Woonsocket

City

Friendly Home, Inc.

State

RI

Zip

02895

Prefix First Name

Street Address

183 Glen Rd

Woonsocket

City

Shaun

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				
		•				ъ.	D (
Drofin	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data	
Tienx	Bethany	IVII	Couto	Sumx		Dance Enterprises		
Street A	Address				Street Addr	-		
19 Steb	er Way				492 Winthro	p Street		
City			State Zip		City		State	Zip
Rehobo	th		MA 02769		Rehoboth		MA	02769
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/29/2021	Deposit Date	Co	ontribution Amount
			In Kind/Other Receipts De					2,000.00
			-	•				
		Con	tributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
C44 A	David		Cowles		Self - Sales			
18 Pine	Address				Street Addr 18 Pine Stre			
City	Succi		State Zip		City	Ct.	State	Zip
Needha	m		MA 02492		Needham		MA	02492
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			500.00
			In Kind/Other Receipts De	scription				
		•				ъ.	D (
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data	
Tienx	Catharine	M.	Cromwell	Sum	Cromwell P			
Street A	Address				Street Addr	ess		
649 Ho	pe St				649 Hope St	t		
City			State Zip		City		State	Zip
Bristol			RI 02809		Bristol		RI	02809
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021			100.00
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		- Dutu	
	Dennis		Crook			Energy Senior Adviso	r Worldwie	de
Street A	Address				Street Addr	ress		
88 Hud	son St				88 Hudson S	St		
City			State Zip		City		State	Zip
Provide			RI 02909		Providence		RI	02909
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		05/14/2021			100.00
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employe	ar Data	

State

RI

Zip

02909

Crook

Suffix

Employer Name

Street Address

88 Hudson St

Providence

City

Renewable Energy Senior Advisor Worldwide

Zip

02909

State

RI

Prefix First Name

Street Address

88 Hudson St

Providence

City

Dennis

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Co	ntribution Amou 357.0
			In Kind/Other Receipts D	escription				
			tributor Information	~ ~~	I	Employe	r Data	
Prefix Fin		MI F.	Last Name or PAC/Party Committee Name Crowe	Suffix	Employer N Town of Cur			
Street Addı		1.	Clowe		Street Addr			
1 Westgate 1					45 Broad St			
City			State Zip		City		State	Zip
Cumberland	i		RI 02864		Cumberland	l.	RI	02864
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		04/29/2021			500.0
			In Kind/Other Receipts D	escription				
							_	
Prefix Fi	rst Name		tributor Information	Suffix	F1N	Employe	r Data	
rrenx ru Le		MI	Last Name or PAC/Party Committee Name sh Cullion	Sumx	Employer N Cullion Con			
Street Addı		тозер	in Camon		Street Addr			
76 Crosslan					PO Box 556			
City			State Zip		City		State	Zip
West Warwi	ick		RI 02893		Wakefield		RI	02880
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		05/19/2021			500.0
			In Kind/Other Receipts D	escription				
D C E	4 NT		tributor Information	C CC	le i v	Employe	r Data	
	rst Name eredith	MI J.	Last Name or PAC/Party Committee Name D'Ambra	Suffix	Employer N D'Ambra Co			
Street Addı		٥.	DAMOR		Street Addr			
33 High Rid						New England Blvd.		
City	8		State Zip		City		State	Zip
South Kings	stown		RI 02879		Coventry		RI	02816
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		05/19/2021	-		250.0
			In Kind/Other Receipts D	escription				
D C	· N		tributor Information		I	Employe	r Data	
	rst Name ichael	MI A.	Last Name or PAC/Party Committee Name D'Ambra	Suffix	Employer N D'Ambra Co			
NII Street Addi		A.	D'Amora		Street Addr			
225 Spring					1	New England Blvd.		
City			State Zip		City		State	Zip
East Greenv	vich		RI 02818		Coventry		RI	02816
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		05/19/2021		30	500.0
			In Kind/Other Receipts D	esemintion				

		Con	tributor Information		Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Na	ame Suffix	Employer Name		
	Michael	V.	D'Ambra		D'Ambra Construction		
Street Address Street Address				Street Address			
101 Hig	h Ridge Dr				80 Centre of New England Blvd.		
City			State Zip		City	State	Zip
Smouth Kingstown RI 02879 Coventry RI 02816				02816			

Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/21/2021			100.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Steve		Darcy		AccuRisk So	olutions LLC		
	Address ple Road				Street Addr 737 Webster			
City			State Zip		City		State	Zip
Marshfi	ield		MA 02050		Marshfield		MA	02050
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		04/21/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Joseph	R.	DePena		VP Fitness, I	LLC		
	Address				Street Addr			
12 Almi	ira Ave		a		10 Dorrance	St, Ste 200	.	
City Provivd	longo		State Zip RI 02909-3934		City Providence		State RI	Zip 02903
					<u> </u>	Donasit Data		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amoun 15.00
			In Kind/Other Receipts De					
			·	•				
			tributor Information				yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N Retired	lame		
S44 A	Paul Address		DePetrillo		Street Addr			
	sant View Rd				73 Pleasant			
City			State Zip		City		State	Zip
Warwic	k		RI 02888		Warwick		RI	02888
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		04/06/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		, cr Dutu	
	Thomas	L.	DePetrillo		NNMC, LLC			
Street A	Address				Street Addr	ess		
179 Sur	nmit View Lane				250B Center	rville Rd		
City			State Zip		City		State	Zip
North K	ingstown		RI 02852		Warwick		RI	02886
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/21/2021			250.00
			In Kind/Other Receipts De	scription				

Contributor Information Employer Data Last Name or PAC/Party Committee Name Suffix Prefix First Name Employer Name Louis A. DeQuattro Law Offices of Louis A. DeQuattro Street Address Street Address 16 East Lakeview Drive 375 Angell Rd City Zip Zip State State RI 02904 02904 North Providence North Providence RI

Item	Transaction Type Check		Contribution Type Individual		deceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
	CHECK		In Kind/Other Receipts De		00/21/2021			200.00
			In Kind Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Ronald		Desiderato	Jr.	State of Rho	de Island - Governo	r's Office	
Street A	ddress				Street Addr	ess		
51 West	nore St				82 Smith St			
City			State Zip		City		State	Zip
Provide	ice		RI 02910		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/09/2021			150.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Richard	H.	Desilets		Warren Heal			
Street A	ddress				Street Addr	ess		
12 Terra	ce Dr				642 Metacor	n Ave		
City			State Zip		City		State	Zip
Bristol			RI 02809		Warren		RI	02886
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/29/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Nanci	L.	Despres		Smithfield P			
Street A	ddress				Street Addr	ess		
31 Willi	ams Rd				295 George	Washington Hwy		
City			State Zip		City		State	Zip
Smithfie	ld		RI 02917-1410		Smithfield		RI	02917
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/15/2021			50.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	or Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		ei Data	
	Matthew		Devine		Lex Nova La			
Street A	ddress				Street Addr	ess		
17 Oriol	e Way				17 Oriole Wa	ay		
City			State Zip		City		State	Zip
Moorest	own	_	NJ 08057		Mooresetow	n	NJ	08057
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	C11-		Individual		06/22/2021			750.00
	Check		Hidividuai		00/22/2021			750.00

Employer Data

Zip

02904

State

RI

Contributor Information

DiDonato

A.

Prefix First Name

Street Address

City

Jamestown

7 Pennsylvania Ave

Bette

Last Name or PAC/Party Committee Name

State

RI

Zip

02835

Suffix

Employer Name

Street Address

1189 Douglas Ave

North Providence

Detroit Collision Center

Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		04/29/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix F	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		CI Dutu	
Т	racy		DiGregorio		DiGregorio,			
Street Add	dress				Street Addr	ess		
23 Fair Oa	ks Dr				23 Business	Park Dr		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Smithfield		RI	02917
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Cor	ntribution Amount
	Credit/Debit Card		Individual		06/09/2021			500.00
			In Kind/Other Receipts De	scription				
						ъ.	D 4	
Prefix F	irst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	Bradford	S	Dimeo	Suma		truction Company		
Street Add	dress				Street Addr			
140 Nayatt					75 Chapman			
City			State Zip		City		State	Zip
Barrington	ı		RI 02806		Providence		RI	02905
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/29/2021	•		500.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Bradford	S	Dimeo			truction Company		
Street Add 140 Nayatt					75 Chapman			
City	i Road		State Zip		City	151	State	Zip
Barrington	1		RI 02806		Providence		RI	02905
Item	Transaction Type		Contribution Type	D	eceipt Date	Deposit Date		ntribution Amount
Item	Credit/Debit Card		Individual		06/27/2021	Deposit Date	Cu	100.00
	Credit Dear Card		In Kind/Other Receipts De		00/2//2021			100.00
			•	•				
		Con	tributor Information			Employ	er Data	
	irst Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	David		DiNobile		Not Employ			
Street Add					Street Addr			
1271 0	rai Avenue		S4-4- 7:-			I Ave	C4-4-	7:
1271 Centr			State Zip		City		State	Zip
City					Inheston		RI	02919
City Johnston	T T		RI 02919		Johnston	D 2/D /	RI	02919
City	Transaction Type Credit/Debit Card				Johnston Receipt Date 06/14/2021	Deposit Date		02919 ntribution Amount 100.00

Employer Data

Zip

02919

State

RI

Contributor Information

DiNobile

Prefix First Name

1271 Central Avenue

Street Address

City

Johnston

David

Last Name or PAC/Party Committee Name

State

RI

Zip 02919

Suffix

Employer Name

Not Employed

Street Address

City

Johnston

1271 Central Ave

Item	Transaction Type Check	Contribution Type Individual				Receipt Date Deposit Date 06/10/2021		Contribution Amount 100.00	
			In Kind/Othe	r Receipts De	scription				
			butor Information				Employer	Data	
Prefix	First Name		Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N	ame		
~	Phyllis	F	DiPrete			Retired			
Street Address						Street Addr			
	0 Greenwood Ln		6			10 Greenwood Ln		St. 4. 7:-	
City			State RI	Zip 02865		City		State RI	Zip 02865
Lincoln						Lincoln		KI	02803
Item	Transaction Type	Contribution Type Individual			Receipt Date Deposit Date		Contribution Amount		
	Check				06/23/2021			500.00	
			In Kind/Othe	er Receipts De	scription				
								D /	
D 6	T1 . 31		butor Information	*** **	0.00	T	Employer	Data	
Prefix	First Name Susan		Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N Homemaker			
Street A			DiPrete			Street Addr			
	naress field Farm Rd					30 Wildfield			
City	neid Palm Ku		State	Zip		City	ram Ku	State	Zip
Narraga	nsett		RI	02882		Narraganset		RI	02882
						_			
Item	Transaction Type Check		Contribution Type Individual			eceipt D ate 05/04/2021	Deposit Date	Ca	ntribution Amou 500.0
	Check			D ! 4- D.		03/04/2021			300.0
			In Kind/Othe	r Receipts De	scription				
		Contri	butor Information				Employer	Data	
Profix	First Name		Last Name or PAC/Party Comr	nittee Name	Suffix	Employer N		Data	
TTCHA	Robert		Discuillo	milet I value	Jr.	Durastone			
Street Address						Street Addr	ess		
675 Pippin Orchard Rd				115 Higginson Ave					
City			State	Zip		City		State	Zip
Cranston	1		RI	02921-3611		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		R	eceipt Date	Deposit Date	Co	ntribution Amou
Ttem.	Check	Individual			04/16/2021			500.00	
			In Kind/Othe	r Receipts De					
					- Parada				
		Contri	butor Information				Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N			
	Peter		DiStefano				Brothers Construction		
Street A	ddress					Street Addr	ess		
121 Whi	itford St					433 Main St			
City			State	Zip		City		State	Zip
Wakefie	ld		RI	02879		Wakefield		RI	02879
Item	Transaction Type	Contribution Type			Receipt Date Deposit Date		Deposit Date	Co	ntribution Amou
	Check Individual			06/03/2021			250.00		
			In Kind/Othe	r Receipts De	scription				
				_	-				
		Contri	butor Information				Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N	ame		
	Michael	т .	Dodd			Sun Chamic	-1.C		

Sun Chemical Corporation

Zip

41048

State

KY

Street Address

City

Hebron

2255 Progress Dr

Michael

200 Hoffman Ave, Unit 104

Street Address

City

Cranston

J.

Dodd

State

RI

Zip

02920

Prefix Street A 52 Cards City Raynhar Item		Con MI H.	In Kind/Other Receipts De tributor Information	scription					
Street A 52 Card City Raynhan	Eric ddress	MI	tributor Information						
Street A 52 Card City Raynhan	Eric ddress	MI	trioutor information			Funlar	u Data		
Street A 52 Card City Raynhan	Eric ddress		Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data		
52 Card City Raynhar			Dodge	Julia	The Okonite				
City Raynhar	inal Cir				Street Addr	ess			
Raynhar					111 Martin S	t			
			State Zip		City		State	Zip	
Item	n		MA 02767		Cumberland		RI	02864	
	Transaction Type Contribution Type Check Individual				Receipt Date Deposit Date Contribution A 06/04/2021				
			In Kind/Other Receipts De						
			_	_					
			tributor Information	Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
Street A	Brendan	P.	Doherty		Doherty Gro Street Addr	-			
	rvation Way				79 Preservat				
City	744022 7749		State Zip		City	.ou way	State	Zip	
Wakefie	ld		RI 02879-8218		Wakefield		RI	02879	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount	
	Credit/Debit Card		Individual		06/23/2021			150.00	
			In Kind/Other Receipts De	scription					
		Contributor Information			Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		1 Data		
	Kristin		Doherty		DoorDash				
Street A	ddress				Street Addr	ess			
116 Plai	n Rd				901 Market	Street 6th Floor			
City			State Zip		City		State	Zip	
Wayland			MA 01778		San Francisc		CA	94103	
Item	Transaction Type Check		Contribution Type		eceipt D ate 06/17/2021	Deposit Date	Cor	ntribution Amount 200.00	
	Cneck		Individual In Kind/Other Receipts De		00/17/2021			200.00	
			in time other receipts be	scription					
		Con	tributor Information			Employe	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
	Michele		Doherty			nker Coastal Homes			
Street A	ddress rvation Way				Street Addr		IInit E AE		
City	rvation way		State Zip		City	unty Commons Way,	State	Zip	
Wakefie	ld.		RI 02879-8218		South Kings	town	RI	02879	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date		ntribution Amount	
ZWIII	Check		Individual		04/20/2021	Deposit Date	Cu	1,000.00	
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employe	er Data		

M.

Dollarhide

Prefix First Name

Street Address

20 Congress Rd

Narragansett

City

Jason

Last Name or PAC/Party Committee Name

State

RI

Zip

02882-3013

Suffix

Employer Name

Street Address

20 Congress Rd

Narragansett

City

Compassion Center of New England

Zip

02882-3013

State

RI

Item	Transaction Type		Contribution Type	R	Receipt Date De	posit Date	Cor	ntribution	Amount
	Check		Individual		06/07/2021				250.00
			In Kind/Other Receipts De	scription					
		Con	atributor Information			Employer D	ata		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	Employer D	ata		
	Gary	.,	Dombrowski		Retired				
Street A	ddress				Street Address				
104 Harn	mon Ave				104 Harmon Ave				
City			State Zip		City		State	Zip	
Cranston	ı		RI 02910		Cranston		RI	02910	
Item	Transaction Type		Contribution Type	R	Receipt Date De	posit Date	Cor	ntribution	Amount
	Credit/Debit Card		Individual		06/22/2021				500.00
			In Kind/Other Receipts De	scription					
		~							
D C	To A NO		atributor Information	C . CC	LE 1 M	Employer D	ata		
Prefix	First Name Shawn	MI R.	Last Name or PAC/Party Committee Name Donahue	Suffix	Employer Name	e Shield of Rhode Is	land		
Street A		K.	Donantie		Street Address	e silield of Kilode Is	sianu		
PO Box 4					500 Exchange St				
City	110		State Zip		City		State	Zip	
Albion			RI 02802		Providence		RI	02903	
Item	Transaction Type		Contribution Type	R	Receipt Date De	posit Date	Cor	ntribution	Amount
	Credit/Debit Card		Individual		06/30/2021	•			250.00
			In Kind/Other Receipts De	scription					
		•				F 1 B			
Duefir	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer Name	Employer D	ata		
rrenx	Shawn	R.	Donahue	Sums		e Shield of Rhode Is	sland		
Street A			2 omme		Street Address				
PO Box					500 Exchange St				
City			State Zip		City		State	Zip	
Albion			RI 02802		Providence	:	RI	02903	
Item	Transaction Type		Contribution Type	R	Receipt Date De	posit Date	Cor	ntribution	Amount
	Check		Individual		04/29/2021				1,000.00
			In Kind/Other Receipts De	scription					
			atributor Information	C 600	[Employer D	ata		
	TI 37		Last Name or PAC/Party Committee Name	Suffix	Employer Name				
Prefix	First Name	MI			I I am Office of D-4				
	Peter	R.	Donatelli Donatelli		Law Office of Pet	er R. Donatelli			
Street A	Peter ddress				Street Address	er R. Donatellı			
Street Ai 388 Veaz	Peter ddress		Donatelli		Street Address 86 Weybosset St		State	Z ip	
Prefix Street Ac 388 Veaz City Providen	Peter ddress tie St				Street Address		State RI	Zip 02903	
Street At 388 Veaz City	Peter ddress tie St		Donatelli State Zip	טר טר	Street Address 86 Weybosset St City Providence		RI	_	Amount

Zip

02920

06/21/2021

Retired

City

Cranston

Employer Name

Street Address

173 Mountain Laurel Dr

Suffix

200.00

Employer Data

State

RI

Zip

02920

Individual

Last Name or PAC/Party Committee Name

State

RI

Contributor Information

Donovan

MI

E.

Check

Prefix First Name

Street Address

City

Cranston

Robert

173 Mountain Laurel Dr

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/08/2021	Deposit Date	Co	ntribution Amount 300.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Gashy		Dowlatshahi			ruction Equipment, Ir	ıc.	
	Address aklawn Ave				Street Addre 1150 Oaklaw			
City	akiawii Ave		State Zip		City	II Ave	State	Zip
Cransto	on		RI 02920		Cranston		RI	02920
				D	1	Domasit Data		
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/06/2021	Deposit Date	Co	ntribution Amount 150.00
	Check		In Kind/Other Receipts De		04/00/2021			150.00
			in initial other receipts be	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Ellen	K.	Downing		Berkshire Pla	ace Nursing Home		
Street A	Address				Street Addre	ess		
65 Anc	hor Dr				455 Douglas	Ave		
City			State Zip		City		State	Zip
Portsme	outh		RI 02871		Providence		RI	02908
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021			250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	Susan	M.	Doyle		Hasbro			
					Hasbro			
Street A	Address				Street Addre	ess		
Street A 55 Ken								
			State Zip		Street Addre		State	Zip
55 Ken City			•		Street Address 1027 Newpon		State RI	Zip 02862
55 Ken City	t Dr		State Zip	R	Street Addre 1027 Newpor City		RI	-
55 Ken City East Gr	t Dr reenwich		State Zip RI 02818 Contribution Type Individual		Street Addre 1027 Newpor City Pawtucket	rt Ave	RI	02862
55 Ken City East Gr	reenwich Transaction Type		State Zip RI 02818 Contribution Type		Street Addre 1027 Newpor City Pawtucket	rt Ave	RI	02862 ntribution Amount
55 Ken City East Gr	reenwich Transaction Type	C	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts De		Street Addre 1027 Newpor City Pawtucket	rt Ave Deposit Date	RI Co.	02862 ntribution Amount
55 Ken City East Gr Item	reenwich Transaction Type Check		State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts De	escription	Street Addre 1027 Newpor City Pawtucket eceipt Date 06/23/2021	nt Ave Deposit Date Employe	RI Co.	02862 ntribution Amount
55 Ken City East Gr Item	reenwich Transaction Type Check First Name	MI	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name		Street Addre 1027 Newpor City Pawtucket eccipt Date 06/23/2021	Deposit Date Employe	RI Co.	02862 ntribution Amount
55 Ken City East Gr Item	reenwich Transaction Type Check First Name David		State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts De	escription	Street Addre 1027 Newpor City Pawtucket eceipt Date 06/23/2021 Employer Na Drubner Equ	Deposit Date Employe ame	RI Co.	02862 ntribution Amount
55 Ken City East Gr Item Prefix Street 2	reenwich Transaction Type Check First Name	MI	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	escription	Street Addre 1027 Newpor City Pawtucket eccipt Date 06/23/2021	Deposit Date Employe ame ities	RI Co.	02862 ntribution Amount
55 Ken City East Gr Item Prefix Street 2	Transaction Type Check First Name David Address	MI	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	escription	Street Addre 1027 Newpor City Pawtucket eccipt Date 06/23/2021 Employer Na Drubner Equi	Deposit Date Employe ame ities	RI Co.	02862 ntribution Amount 1,000.00
55 Ken City East Gr Item Prefix Street 2 19245 1	reenwich Transaction Type Check First Name David Address Fisner Island Dr	MI	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Drubner	escription	Street Addre 1027 Newpor City Pawtucket eceipt Date 06/23/2021 Employer N: Drubner Equi Street Addre 19245 Fisner	Deposit Date Employe ame ities	RI Co: r Data	02862 ntribution Amount
55 Ken City East Gr Item Prefix Street 2 19245 1 City	reenwich Transaction Type Check First Name David Address Fisner Island Dr	MI	State Zip RI 02818 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Drubner State Zip	Suffix	Street Addre 1027 Newpor City Pawtucket eceipt Date 06/23/2021 Employer Na Drubner Equi Street Addre 19245 Fisner City	Deposit Date Employe ame ities	RI Con r Data State FL	02862 ntribution Amount 1,000.00

Zip

02886

Suffix

Employer Name

Street Address

East Greenwich

22 London St

Checkmate Consulting

Employer Data

Zip

02886

State

RI

Contributor Information

Dufault

A.

Prefix First Name

222 Major Potter Rd

Street Address

City

Warwick

Guy

Last Name or PAC/Party Committee Name

State

RI

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/08/2021	Deposit Date	Co	ntribution Amount 250.00
	- Caron		In Kind/Other Receipts De					253.53
			tributor Information		T	Employ	er Data	
	First Name Chester	MI A.	Last Name or PAC/Party Committee Name Duff	Suffix	Employer N Astro Chemi			
Street Ad		A.	Duit		Street Addr			
	i Hill Beach Rd				126 Memori			
City			State Zip		City		State	Zip
Wakefield	l		RI 02879		Springfield		MA	01104
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/20/2021			1,000.00
			In Kind/Other Receipts De	scription				
		C	4			F1	D. 4-	
Prefix I	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	Evelyn	J.	Duffy	Suma	Retired			
Street Ad	•		,		Street Addr	ess		
5 Sandro (Circle				5 Sandro Cir	rcle		
City			State Zip		City		State	Zip
Warwick			RI 02886		Warwick		RI	02886
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. P.		04/20/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix I	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
N	Mark	D.	Duffy		Retired			
Street Ad					Street Addr			
5 Sandro (Circle				5 Sandro Cir	rcle		
City Warwick			State Zip		City Warwick		State	Zip 02886
			RI 02886				RI	
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 04/20/2021	Deposit Date	Co	ntribution Amount 250.00
	CHECK		In Kind/Other Receipts De		04/20/2021			250.00
		Con	tributor Information			Employ	er Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Kenneth	R.	Dulgarian		1	lgarian Properties		
Street Ad					Street Addr			
PO Box 2	301		S		144 Waterma	an St, Ste 6	G	
City Providenc	e		State Zip RI 02906		City Providence		State RI	Zip 02906
				n		Deposit Date		ntribution Amount
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/21/2021	Deposit Date	Co	500.00
			In Kind/Other Receipts De					555.00
			•	•				
		Con	tributor Information			Employ	er Data	

ΜI

P.

Durkin

Last Name or PAC/Party Committee Name

State

RI

Zip 02882

Suffix

Employer Name

Durkin Cottages

Street Address

Narragansett

City

134 Sand Hill Cove Rd

Zip 02882

State

RI

Prefix First Name

Street Address

375 Ocean Rd

Narragansett

City

James

Item	Transaction Trans		Contribution True	ם	Receipt Date	Deposit Date	Co	ntribution A	
Hein	Transaction Type Credit/Debit Card		Contribution Type Individual		06/21/2021	Deposit Date	Cu		200.00
			In Kind/Other Receipts De	scription					
			•	•					
		Con	tributor Information			Employ	er Data		
Prefix	First Name Dina	MI	Last Name or PAC/Party Committee Name Elhelw	Suffix	Employer N Town of Scit				
Street A	Address rth Rd				Street Addr 195 Danielso				
City Hope			State Zip RI 02831		City Scituate		State RI	Zip 02857	
Item	Transaction Type		Contribution Type		Receipt Date 05/13/2021	Deposit Date	Co	ntribution A	
	Check		Individual In Kind/Other Receipts De		03/13/2021				500.00
			II Killa Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame			
	Katharine	R.	Epp		Friends Nurs	sing Home			
	Address				Street Addr				
	ingham Rd				303 Rhodes	Ave			
City			State Zip		City		State	Zip	
Blackst	one		MA 01504		Woonsocket		RI	02895	
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution A	
	Check		Individual In Wind/Other Pessints De		06/16/2021				900.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
	Douglas		Epstein		Horizon Bev	verage Co			
Street A	Address				Street Addr	ess			
121 Ho	pkins Hill Rd				45 Commerc	ce Way			
City			State Zip		City		State	Zip	
West G	reenwich		RI 02817		Norton		MA	02766	
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution A	
	Check		Individual P. A.		06/17/2021			9	900.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		CI Data		
	Michael	J.	Epstein			erage Association			
Street A	Address		-		Street Addr	ess			
80 Stoc	kwell Dr				45 Commere	ece Way			
City			State Zip		City		State	Zip	
Avon			MA 02322		Norton		MA	02766	
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/15/2021	Deposit Date	Co	ntribution A	mount 900.00
	Caroth		In Kind/Other Receipts De						

Contributor Information Employer Data Last Name or PAC/Party Committee Name Suffix Prefix First Name Employer Name Horizon Beverage Co. Robert Epstein Street Address Street Address 300 Boylston St, Apt 703 45 Commerce Way City State Zip City Zip State 02116 02766 Boston MA Norton MA

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
D C	TO AN		tributor Information	C 65	Ir i v	Employer	r Data	
Prefix	First Name Joseph	MI	Last Name or PAC/Party Committee Name Esposito	Suffix	Employer N Esposito Jew			
Street	Address		Esposito		Street Addre	-		
	ston Neck Rd				225 Dupont			
City			State Zip		City		State	Zip
Narraga	nsett		RI 02882		Providence		RI	02907
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/03/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	Janice	M.	Fahy		Homemaker			
Street A	Address				Street Addre	ess		
202 Old	l Farm Rd				202 Old Farr	n Road		
City			State Zip		City		State	Zip
Milton			RI 02186		Milton		RI	02186
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
C	William	Mich	aeFarrell			arrell and Associates		
	Address ey St, Apt 111				PO Box 2543			
City	, y 50, 11pt 111		State Zip		City	,	State	Zip
Provide	nce		RI 02909		Providence		RI	02905
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/10/2021	•		1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer	· Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Thomas	F.	Farrelly	Jr.	1	erial Equipment		
64	Address				Street Addre	ess		
Street A					45 Alice Agn	new Dr		
	nnet Point Rd							
	nnet Point Rd		State Zip		City		State	Zip
273 Bo			State Zip RI 02882		City North Attleb	ого	State MA	Zip 02763
273 Box City						oro Deposit Date	MA	

Zip

02818

Suffix

Employer Name

Street Address

395 Smith St

Providence

City

Hamel Waxler Allen & Collins

Employer Data

Zip

02908

State

RI

Contributor Information

Feeney

P.

Last Name or PAC/Party Committee Name

State

RI

Prefix First Name

Street Address

East Greenwich

City

194 Pine Glen Dr

Sean

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/16/2021	Deposit Date	Ca	ntribution Amount 25.00
			In Kind/Other Receipts De	scription				
						F 1	D 4	
Profix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employer	Data	
пепх	Bill	IVII	Fegley	Sumx		ids Community Partner	s	
Street A	Address		5 3		Street Addr	_		
364 Riv	er Ave				364 River A	ve		
City			State Zip		City		State	Zip
Provider	nce		RI 02908		Providence		RI	02908
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 500.00
	Circu		In Kind/Other Receipts De		00/21/2021			300.00
			•	•				
		Con	tributor Information			Employer	Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
64 4 4	Joseph	I.	Ferreira		JIF Investme			
Street A PO Box					Street Addr PO Box 156			
City	130		State Zip		City		State	Zip
Cumber	land		RI 02864		Cumberland	ı	RI	02864
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/15/2021			25.00
			In Kind/Other Receipts De	scription				
		C	tributor Information			Employer	D-4-	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	Kenneth	J	Filarski			hitect & Planning		
Street A	Address				Street Addr	ress		
39 Perre	enial Drive				PO Box 321	0		
City			State Zip		City		State	Zip
Cranston	n		RI 02920		Providence		RI	02909
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/23/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Christine		Fiore		Info Reques			
Street A					Street Addr	ress		
	quage Dr		St. 1. 7:-		C:t-		C4-4-	7:
City Narraga:	nsett		State Zip RI 02882		City		State	Zip
Item	Transaction Type		Contribution Type	ъ	Leceipt Date	Deposit Date	Ca	ntribution Amount
rem	Check		Individual		04/15/2021	Deposit Date	Co	1,000.00
			In Kind/Other Receipts De					
			-					
			Last Name or PAC/Posts Committee Name		Employer N	Employer	Data	
Duefir	First Name	MI						

State

RI

Suffix

Zip 02879-4004

Employer Name

Street Address

City

Wakefield

Fiore Resource Industries

145 Fiore Industrial Dr

State

RI

Zip

02879

MI

Fiore

J.

Prefix First Name

Street Address

571 Main St

Wakefield

City

Roland

Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 04/06/2021	Deposit Date	Co	ntribution Ar	nount 00.00
			In Kind/Other Receipts De	scription					
		_							
D 6	First Name		tributor Information	0.00	I N	Employ	er Data		
Prenx	Brett	MI E.	Last Name or PAC/Party Committee Name Fish	Suffix	Employer Na Nova Farms I				
Stroot /	Address	L.	1 1511		Street Addre				
	herman Rd				133 Old Towe				
City			State Zip		City	1111111111	State	Zip	
Wakefie	eld		RI 02879-6019		Wakefield		RI	02879-6019	9
						D '/ D /			
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Ar	
	Credit/Debit Card		Individual In Kind/Other Pessints De		06/23/2021				25.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na				
	David		Florio		Not Employe				
Street A	Address				Street Addre				
153 Pri	nceton Ave				153 Princetor	ı Ave			
City			State Zip		City		State	Zip	
Covent	rv		RI 02816		Coventry		RI	02816	
						D '/ D /			
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		06/23/2021	Deposit Date	Co	ntribution Ar	nount 00.00
	Clediv Debit Cald							1,0	00.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame			
	Patrick	R	Flory		Info Requeste	ed			
Street A	Address				Street Addre	SS			
2602 Ca	alderon Drive								
City			State Zip		City		State	Zip	
Santa M	Maria (1997)		CA 93455						
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Ar	nount
	Check		Individual		04/12/2021	•		2	00.00
			In Kind/Other Receipts De	scription					
			tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na				
	William		Freitas		Atlantic Fami				
	Address				Street Addre				
140 Cre	est Field Ln				2345 Mendon	ı Rd			
City			State Zip		City		State	Zip	
North K	Kingstown		RI 02852-7312		Woonsocket		RI	02895	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Ar	nount
	Credit/Debit Card		Individual		06/16/2021			2	00.00
			In Kind/Other Receipts De	scription					
		_							
D	71		tributor Information		In	Employ	er Data		
Prefix		МІ	Last Name or PAC/Party Committee Name	Suffix	Employer Na				
	Michael		Friedman		Paolino Prope	erties			
Ctore of A	A J.J				Ctuest A.J.				

Zip 02818

State

RI

Street Address

East Greenwich

Zip 02818

State

RI

10 Taggart Ct

City

Street Address

10 Taggart Ct

East Greenwich

City

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Ca	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				
		C	4			F	D. 4-	
Prefix Fi	ivet Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	erri	H.	Friel	Sumx	CCRI	vame		
Street Add	ress				Street Addr	ess		
113 Merryn	nount Dr				1762 Louisq	uisset Pike		
City			State Zip		City		State	Zip
Warwick			RI 02888		Lincoln		RI	02865
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/06/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		LI Data	
	homas	E.	Furey			ng & Construction C	o., Inc.	
Street Add	ress				Street Addr	ress		
100 Algong	uin Rd, Unit 24				85 Cypress S	St		
City			State Zip		City		State	Zip
Narraganse	tt		RI 02882		Warwick		RI	02888
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/01/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	or Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		CI Data	
Ti	homas	E.	Furey			ng & Construction C	o., Inc.	
Street Add	ress				Street Addr	ress		
100 Algong	uin Rd, Unit 24				85 Cypress S	St		
City			State Zip		City		State	Zip
Narraganse	tt		RI 02882		Warwick		RI	02888
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/30/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	or Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		ei Data	
	ary	E	Furtado		Navigant Cr			
Street Add					Street Addr	ess		
15 Beth Av	e				1005 Dougla	as Pike		
City			State Zip		City		State	Zip
Warren			RI 02885		Smithfield		RI	02916
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/01/2021			1,000.00
			In Kind/Other Receipts De	scription				
		•	tuibutan Infannati			F	D-4	
		Con	tributor Information			Employ	er Data	

Prefix First Name

Street Address

12 Whipple Ave

City

Warwick

John

ΜI

A.

Furtado

Last Name or PAC/Party Committee Name

State

RI

Zip 02889

Suffix

Employer Name

Street Address

City

Johnston

A. A. Wrecking Co., Inc.

1307 Hartford Ave, Rear

Zip

02919

State

RI

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/14/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
		_					_	
D 6	T1 17		ributor Information	0.00	In 1 37	Employer	Data	
Prefix	First Name Gregory	MI A.	Last Name or PAC/Party Committee Name Gabel	Suffix	Employer Na	oncepts & Sales LLC		
S44 A		A.	Gabei		Street Addre	-		
Street A PO Box					44 Terry Lan			
	113		S4-4- 7:-		_	6	64-4-	7:
City Harmon	N/		State Zip RI 02829		City Chepachet		State RI	Zip 02814
	-				_			
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
		C	wibuton Information			F1	Dot-	
DE	Einst Name		ributor Information	Suffix	FI N	Employer	Data	
Prefix	First Name Douglas	MI W	Last Name or PAC/Party Committee Name Gablinske	Sumx	Employer Na AppraiseRI	ame		
Street A		vv	Gaoiniske		Street Addre			
5 Pokan					576 Metacon			
City	OKCI II		State Zip		City	TAVE, SIE 6	State	Zip
Warren			RI 02885		Bristol		RI	02809
					I			
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/08/2021	Deposit Date	Co	ntribution Amount 1,000.00
	Check				00/08/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Conf	ributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
пенх	Wayne	A	Gablinske	Sum	State of Rhoo			
Street A	•				Street Addre			
48 Beac					2 Capitol Hil			
City			State Zip		City		State	Zip
Bristol			RI 02809-1449		Providence		RI	02903
Item	Transaction Type		Contribution Type	D	Passint Data	Donosit Data	Co	ntribution Amount
Hein	Check		Individual		deceipt Date 06/28/2021	Deposit Date	Cu	500.00
	CHCCK		In Kind/Other Receipts De		00/20/2021			500.00
			in Kind/Other Receipts De	scription				
		Conf	ributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	1 1		
	Deborah		Galvin		Retired	•		
Street A					Street Addre	ess		
41 Bear					41 Bear Hill			
City			State Zip		City		State	Zip
Seekonl	c		MA 02771		Seekonk		MA	02771
Item	Transaction Type		Contribution Type	D	leceipt Date	Deposit Date	Co	ntribution Amount
rtein	Check		Individual		06/14/2021	Deposit Date	CO.	1,000.00
	Sacca		In Kind/Other Receipts De		- 5. 2 . 2021			1,000.00
			In Mind Other Receipts De	cription				
		Conf	ributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Dannis		Gamba	Jania	Cranston Col			

Cranston Collision Center

Zip

02920

State

RI

30 Walnut Grove Ave

Street Address

City

Cranston

Dennis

Street Address

City

Cranston

30 Walnut Grove Ave

Gamba

State

RI

Zip

02920

Item	Transaction Type Check	Contribution Type Individual		eceipt Date Deposit Da 04/28/2021	nte Co	ntribution Amount 500.00
		In Kind/Other Receipts De	scription			
		Contributor Information			mployer Data	
Prefix	First Name Catherine	MI Last Name or PAC/Party Committee Name Farren Gambino	Suffix	Employer Name		
S		Farren Gambino		Homemaker		
Street A				Street Address		
	ey Garden Street	O		280 Tobey Garden Street	5	
City	_	State Zip MA 02332-4923		City	State	Zip 02332
Duxbury				Duxbury	MA	02332
Item	Transaction Type	Contribution Type		eceipt Date Deposit Da	nte Co	ntribution Amount
	Check	Individual		06/15/2021		1,000.00
		In Kind/Other Receipts De	scription			
		C 47 4 T C 4			1 D.	
D 6	T2 . 3T	Contributor Information	0.00		mployer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name L. Gavin	Suffix	Employer Name Homemaker		
Street A	Cynthia	L. Gavin				
	aaress tryside Dr			Street Address 62 Countryside Dr		
	uyside Di	S4-4- 7:			64-4-	7:
City Cumberl	and	State Zip RI 02864-2618		City Cumberland	State RI	Zip 02864-2618
Item	Transaction Type	Contribution Type		eceipt Date Deposit Date 04/30/2021	ite Co	ntribution Amount
	Check	Individual		04/30/2021		1,000.00
		In Kind/Other Receipts De	scription			
		Contributor Information		T	mployer Data	
Profix	First Name	MI Last Name or PAC/Party Committee Name	Suffix	Employer Name	inployer Data	
Пепх	Louis	YehoshGellis	Sum	West View Nursing & Reh	abilitation Center	
Street A				Street Address		
1257 E.				239 Legris Ave		
City		State Zip		City	State	Zip
Brookly	n	NY 11210-4630		West Warwick	RI	02893
			ъ	l .		
Item	Transaction Type Check	Contribution Type Individual		eceipt Date Deposit Da 05/12/2021	ite Co	ntribution Amount 1,000.00
	CHECK	In Kind/Other Receipts De		03/12/2021		1,000.00
		III Kilid/Other Receipts De	scription			
		Contributor Information		E	mployer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix	Employer Name	inprojer zata	
	Leslie	Gernt		Coleman Realtors		
Street A				Street Address		
14 Wing				135 Elmgrove Ave		
City		State Zip		City	State	Zip
Provider	ice	RI 02906		Providence	RI	02906
Item	Transaction Type	Contribution Type	R	eceipt Date Deposit Da	nte Co	ntribution Amount
rem	Credit/Debit Card	Individual		06/15/2021		100.00
		In Kind/Other Receipts De				
			Puon			
		Contributor Information		E	mployer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Theresa	Girard	_	Mill City Construction		

Mill City Construction

State

RI

Zip

02865

Street Address

7 Old Great Rd

City

Lincoln

Theresa

Street Address

31 Ridge Dr.

Narragansett

City

Girard

State

RI

Zip

02882

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/22/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix First	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	hard	S.	Glucksman			& Blue Shield of RI		
Street Addre	ess				Street Addr	ess		
31 Chiswick	Rd				500 Exchang	ge St		
City			State Zip		City		State	Zip
Cranston			RI 02905		Providence		RI	02903
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/11/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix First	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Tho	omas		Goldberg		Goldberg La	w Offices		
Street Addre	ess				Street Addr	ess		
226 Cottage	Street				226 Cottage	Street		
City			State Zip		City		State	Zip
Pawtucket			RI 02860		Pawtucket		RI	02860
Item	Transaction Type		Contribution Type Individual		deceipt Date 06/10/2021	Deposit Date	Co	ntribution Amount
	Check		In Kind/Other Receipts De		00/10/2021			100.00
			in fund other receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix First		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
Jeff	frey	В.	Goldstein		Retired			
Street Addre	ess				Street Addr	ess		
19 14th Ave					19 14th Ave			
City			State Zip		City		State	Zip
Warwick			RI 02886		Warwick		RI	02886
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual In Kind/Other Receipts De		06/18/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix Fire	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
Ron	nald		Goldstein		Free Media			
Street Addre	ess				Street Addr	ress		
42 Benson A	ve				42 Benson A	lve		
City			State Zip		City		State	Zip
Westerly			RI 02891		Westerly		RI	02891
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/16/2021			25.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
		Con				Limpidye		

State

RI

Zip

02864

Goodrich

Suffix

Employer Name

Street Address

45 Broad Street

Cumberland

City

Town of Cumberland

State

RI

Zip

02864

Prefix First Name

Street Address

Cumberland

City

15 Jackson Street

Barbara

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/08/2021	Deposit Date	Con	ntribution Amou 500.
			In Kind/Other Re	eceipts Description				
		Contributor Info				Employe	r Data	
Prefix F			or PAC/Party Committe	ee Name Suffix	Employer N			
	elenn -	R. Goodwin			Atlantic Hor			
Street Add					Street Addr			
	vood Farm Rd				100 Davisvi	le Pier		
City			State Zip		City		State	Zip
Wakefield			RI 028	379	North Kings	town	RI	02852
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amou
	Credit/Debit Card		Individual	(06/17/2021			15.
			In Kind/Other Re	eceipts Description				
		Contributor Info	mation			Employe	r Data	
Prefix F	irst Name		or PAC/Party Committe	ee Name Suffix	Employer N			
R	Robert	Gottfried			Info Reques	ted		
Street Add	dress				Street Addr	ess		
115 Monto	lair Dr							
City			State Zip	1	City		State	Zip
West Harti	ford		CT 061	07				
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Con	ntribution Amou
	Check		Individual	(06/23/2021			500.
			In Kind/Other Re	eceipts Description				
		Contributor Info	rmation			Employe	r Data	
Prefix F	irst Name	MI Last Name	or PAC/Party Committe	ee Name Suffix	Employer N	ame		
P	aige	R. Goulart			Info Reques	ted		
Street Add	dress				Street Addr	ess		
26 Stanton	ı Rd							
City			State Zip	1	City		State	Zip
Portsmout	h		RI 028					
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		06/08/2021	Deposit Date		1,000.
			In Kind/Other Re	eceipts Description				-,
				ecepto Description				
		Contributor Info	mation			Employe	r Data	
Prefix F	irst Name		or PAC/Party Committe	ee Name Suffix	Employer N		1 Data	
	ames	Scott Grace	of TAC/Tarty Committee	Sum Sum		oor Company of Prov	idence	
Street Add		Seem Grace			Street Addr		I GCIICC	
148 Colum					One Overhe			
City	iola Lanc		State Zip		City	ad way	State	Zip
Jamestown			RI 028		Warwick		RI	02920
	_					n		
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		06/07/2021			1,000.
			In Kind/Other Re	eceipts Description				
		0 . 1 . 7 .					D /	
D 6	3 3.T	Contributor Info		37 ~ ~		Employe	r Data	
	irst Name	MI Last Name	or PAC/Party Committe	ee Name Suffix	Employer N	ame		
		(traham			Augenie Pub			

Aidan's Pub

5 John St City

Bristol

Street Address

State

RI

Zip

02809

Aidan

Street Address

City

Portsmouth

54 Aquidneck Ave

J.

Graham

State

RI

Zip

02871

Item	Transaction Type Check		Contribution Type Individual		Seceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amoun 400.00
	Check		In Kind/Other Receipts De		00/10/2021			100.00
			•	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name Joseph	MI S.	Last Name or PAC/Party Committee Name Grasso	Suffix	Employer N Retired	ame		
Street A 28 Atwe					Street Addre 28 Atwells A			
City Johnston	1		State Zip RI 02919		City Johnston		State RI	Zip 02919
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/17/2021	Deposit Date	Co	ntribution Amoun 500.00
			In Kind/Other Receipts De	scription				
		_						
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N		er Data	
Henx	Domenic	R.	Grieco	Sumx	Metro Motor			
Street A	ddress				Street Addr	-		
7 Christ	opher Dr				1215 W. Mai	in Rd		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Middletown		RI	02842
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Jennifer	A.	Griffith		State of Rho	de Island		
Street A	ddress outh Rd				Street Address 82 Smith St	ess		
City	outii Ku		State Zip		City		State	Zip
East Pro	vidence		RI 02914		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/23/2021	-		1,000.00
			In Kind/Other Receipts De	scription				
		~						
Prefix	First Name		tributor Information	Suffix	F N	1 0	er Data	
Frenx	Deborah	MI A.	Last Name or PAC/Party Committee Name Grundy	Sumx	Employer N Homemaker	ame		
Street A					Street Addr	ess		
2 Kings	Row				2 Kings Row	ī		
City			State Zip		City		State	Zip
Cumber	land		RI 02864		Cumberland		RI	02864
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/23/2021	Deposit Date	Co	ntribution Amoun 1,000.00
			In Kind/Other Receipts De					

Employer Data

Zip

02882

State

RI

Contributor Information

Grundy

Last Name or PAC/Party Committee Name

State

RI

Zip

02852

Suffix

Employer Name

Street Address

Narragansett

City

Coastview Realty LLC

960 Boston Neck Rd

ΜI

A.

Prefix First Name

Street Address

485 Exeter Rd

North Kingstown

City

Julie

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/17/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De					Í
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Peter	J	Grundy		Dome Const	ruction		
	Address				Street Addr			
2 Kings	Row				174 Foundry	St		
City			State Zip		City		State	Zip
Cumber	rland		RI 02864		Central Falls	5	RI	02863
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Sean	P	Grundy		Atlantic Con	ntrols		
Street A	Address				Street Addr	ess		
14 Orch	nard Hill Dr				318 Drybrid	ge Rd		
City			State Zip		City		State	Zip
West Ki	ingstown		RI 02892-1170		North Kings	town	RI	02852
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amount 200.00
	CHECK		In Kind/Other Receipts De		00/10/2021			200.00
			In Kind Other Receipts De	scription				
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Fred	J.	Guarino		Rubiano & C			
Street A 9 Harve	Address				Street Addr			
	est Ka		St. 4. 77		7 Austin Ave	e, Ste 1	64.4	77.
City Rehobo	th		State Zip MA 02769		City Greenville		State RI	Zip 02828
				D	·	Dit D-t-		
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 04/29/2021	Deposit Date	Co	ntribution Amount 1,000.00
	CHCCK		In Kind/Other Receipts De		04/25/2021			1,000.00
			·	•				
			tributor Information			Employ	er Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Thomas	F.	Guerra		The Foundry			
	Address				Street Addr			
27 Sylv	ia Lane		S		235 Promena	ade St	G	77.
City			State Zip		City		State	Zip

RI

Contribution Type

Last Name or PAC/Party Committee Name

State

RI

Individual

Contributor Information

Hainsworth

A.

02865

In Kind/Other Receipts Description

Zip

02835

Providence

Employer Name

Street Address

City

Jamestown

Town of Jamestown

93 Narragansett Ave

Receipt Date

06/23/2021

Suffix

RI

State

RI

Zip

02835

Employer Data

Deposit Date

02908

Contribution Amount

500.00

Lincoln

Transaction Type

Check

First Name

Jamie

25 Pleasant View Ave

Street Address

Item

Prefix

City

Jamestown

Contributor Information	Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 500.00
Prefix First Name									
Prefix First Name				-	_				
Fierce J. Haley Street Address			Con	tributor Information			Employ	er Data	
Street Addiress Street Add	Prefix				Suffix		ıme		
Signate			J.	Haley		1			
State									
Destination Transaction Type Contribution Type Contributi		klin St					t	~	~.
Transaction Type	-								-
Check	Boston					<u> </u>			
Contributor Information Employer Data	Item						Deposit Date	Co	
Contributor Information		Check				06/08/2021			1,000.00
Prefix First Name MI				In Kind/Other Receipts De	scription				
Prefix First Name MI				4			F	D-4:	
Scot	D _w -E	First Name			C	F.mlas N		er Data	
Street Address Street Address Street Address Street Address Street Address State Zip City State Zip City State Zip Wakefield RI 0.2879 Wakefield RI 0.2879 Wakefield RI 0.2879	Prenx				Sumx				
State Zip City	Street A		٧.	Halloeig					
State Zip Wakefield W						1	55		
Transaction Type		wood I talli Ito		State 7in				State	7in
Transaction Type Check Individual O6/15/2021 Ontribution Amore Check Individual O6/15/2021 Ontribution Information O6/15/2021 Ontribution Information Office of Check Individual Office of Check Ontribution Information Ontribution Information Office of Check Ontribution Information Ontribution Informati	•	ıld		_					_
Check Individual O6/15/2021 250.00					D	<u> </u>	Domania Data		
Prefix First Name MI Last Name or PAC/Party Committee Name Suffix Employer Name Hope Global Street Address	item					-	Deposit Date	Co.	250.00
Contributor Information Employer Data		Check				00/15/2021			250.00
Prefix First Name James P. Hanahan Hope Global				iii Kiila Other Receipts De	scription				
Prefix First Name James P. Hanahan Hanahan Hope Global			Con	tributor Information			Employ	er Data	
Street Address P. Hanahan Hope Global	Prefix	First Name			Suffix	Employer Na			
10 Frederick Lane City		James	P.						
City Cumberland	Street A	Address				Street Addre	ss		
Cumberland RI 02864 Cumberland RI 02864 Cumberland Receipt Date Deposit	10 Fred	erick Lane				50 Martin St			
Transaction Type Contribution Type Receipt Date Deposit Date Contribution Amount Check Individual 06/23/2021 500.00	City			State Zip		City		State	Zip
Check Individual O6/23/2021 500.00	Cumber	land		RI 02864		Cumberland		RI	02864
In Kind/Other Receipts Description Contributor Information Prefix First Name Heather Hawkins Street Address 122 14th St, NE City State Zip City State Zip Naples FL 34120 Sneads FL 32460 Item Transaction Type Check Individual 05/04/2021 Contribution Amout Information Contributor Information Employer Data Employer Data	Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
Contributor Information Employer Data		Check		Individual		06/23/2021			500.00
Prefix First Name Heather Hawkins Suffix I Jamm Development Street Address Suffix I Stree				In Kind/Other Receipts De	scription				
Prefix First Name Heather Hawkins Suffix I Jamm Development Street Address Suffix I Stree									
Heather Hawkins Jamm Development Street Address 122 14th St, NE City State Zip City State Zip Naples FL 34120 Sneads FL 32460 Item Transaction Type Contribution Type Receipt Date Deposit Date Contribution Among Check Individual 05/04/2021 1,000.05 In Kind/Other Receipts Description Contributor Information Employer Data			Con	tributor Information			Employ	er Data	
Street Address 122 14th St, NE City State Zip Naples FL 34120 Contribution Type Contribution Type Check Check Contributor Information Contributor Information Contributor Information Street Address 2372 Curlee Road City State Zip Sneads FL 32460 Contribution Amount of the Contribution Type Receipt Date Deposit Date Contribution Amount of the Contribution Amount of the Check In Kind/Other Receipts Description Employer Data	Prefix		MI	Last Name or PAC/Party Committee Name	Suffix				
122 14th St, NE		Heather		Hawkins			_		
City State Zip City State Zip Naples FL 34120 Sneads FL 32460 Item Transaction Type Contribution Type Receipt Date Check Individual 05/04/2021 Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual 05/04/2021 Total Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the Check Individual Contribution Deposit Date Contribution Amount of the C									
Naples FL 34120 Sneads FL 32460 Item Transaction Type Contribution Type Receipt Date Check Individual 05/04/2021 Deposit Date 1,000.0 In Kind/Other Receipts Description Contributor Information Employer Data		h St, NE				2372 Curlee I	Road		
Item Transaction Type Check Contribution Type Individual Receipt Date Objoint D				_					_
Check Individual 05/04/2021 1,000.00 In Kind/Other Receipts Description Contributor Information Employer Data	Naples			FL 34120		Sneads		FL	32460
Contributor Information Employer Data	Item					-	Deposit Date	Co	ntribution Amount 1,000.00
Contributor Information Employer Data				In Kind/Other Receipts De	scription				
				-					
Prefix First Name MI Last Name or PAC/Party Committee Name Suffix Employer Name			Con	tributor Information			Employ	er Data	
	Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ıme		

State

RI

Zip

02917

Street Address

28 Orchard Meadows Dr

State

RI

Zip

02917

Retired

City

Smithfield

Street Address

City

Smithfield

Kevin

28 Orchard Meadows Dr

J.

Hawkins

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/08/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts D	escription				
		•				т.	D 4	
D . C	E' N		tributor Information	C . CC	I E . I X		yer Data	
rrenx	First Name Mark	MI	Last Name or PAC/Party Committee Name Hawkins	Suffix	Employer N Dry Bridge S	Sand & Stone		
Street A	Address				Street Addr			
89 Mine	er Rd				471 Dry Brid	dge Road		
City			State Zip		City		State	Zip
North K	ingstown		RI 02874		North Kings	town	RI	02852
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 500.00
	- Carona		In Kind/Other Receipts De					330.00
			1	•				
		Con	tributor Information			Emplo	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Mark		Hawkins		1	Sand & Stone		
Street A					Street Addr			
89 Mine	er Kd		St. t. 7:-		471 Dry Brid	dge Koad	64-4-	7:
City North K	ingstown		State Zip RI 02874		City North Kings	town	State RI	Zip 02852
Item	Transaction Type Check		Contribution Type Individual	Ь	Receipt Date 06/23/2021	Deposit Date	Ca	ntribution Amount 1,000.00
	Check		In Kind/Other Receipts De	escription				1,000.00
				.				
		Con	tributor Information			Emplo	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Timothy	P.	Haxton		Haxton Liqu	iors		
Street A					Street Addr			
PO Box	3283				1123 Bald H	lill Rd		
City Narraga	nsett		State Zip RI 02882		City Warwick		State RI	Zip 02886
Item	Transaction Type Check		Contribution Type Individual	Ь	06/21/2021	Deposit Date	Co	ntribution Amount 250 00
	Check		In Kind/Other Receipts D	escrintion				230.00
			In Kind Other Receipts De	escription				
		Con	tributor Information			Emplo	yer Data	
Prefix	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	David	W.	Hayes		D & H Colli	sion Center		
Street A	Address				Street Addr	ess		
57 Twin	Birch Dr				1783 Elmwo	ood Ave		
City			State Zip		City		State	Zip
Cransto			RI 02921		Warwick		RI	02888
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/14/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts D	escription				

Employer Data

Zip

02888

State

RI

Contributor Information

Hayes

W.

Last Name or PAC/Party Committee Name

State

RI

Zip

02831

Suffix

Employer Name

Street Address

City

Warwick

1769 EWlmwood Ave

Law Office of David W. Hayes

Prefix First Name

Street Address

120 Scituate Ave

City

Hope

David

Item	Transaction Type		Contribution Type	R	Seceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/13/2021	Deposit Date		500.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
Prefix	First Name Susyn	MI M.	Last Name or PAC/Party Committee Name Hayes	Suffix	Employer Na Homemaker	ame		
Street A	Address aw Ave				Street Addre 139 Shaw Av			
City Cransto	n		State Zip RI 02905		City Cranston		State RI	Zip 02905
Item	Transaction Type		Contribution Type		Receipt D ate 06/10/2021	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		00/10/2021			300.00
			In Innovince factifies De	Prior				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Jane	A.	Hayward			nter Association		
	Address				Street Addre			
	uded Dr		State 7:-		1	de St, Ste 455	64-4-	7:-
City Narraga	ensett		State Zip RI 02882		City Providence		State RI	Zip 02908
				D	I	Domanit Data		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt Date 06/24/2021	Deposit Date	Co.	ntribution Amount 100.00
			In Kind/Other Receipts De					
			•	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name Nancy	MI	Last Name or PAC/Party Committee Name Heath	Suffix	Employer Na RI School for			
Street A	Address		Team		Street Addre			
31 Third					1 Corliss Pari			
City			State Zip		City		State	Zip
Attlebo	го		MA 02730		Providence		RI	02908
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 04/22/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Fmploy	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		ei Data	
110111	William	M.	Heffernan	Julia		w Offices PC		
Street A	Address				Street Addre	ess		
27 Old	Barn Rd				2145 Diamor	nd Hill Rd		
City			State Zip		City		State	Zip
Little C	ompton		RI 02837		Cumberland		RI	02864
Item	Transaction Type Check		Contribution Type Individual		Seceipt Date 06/10/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts De					
			•	-				

Employer Data

Zip

02864

State

RI

Contributor Information

Hefner

Last Name or PAC/Party Committee Name

State

RI

Zip

02864-3494

Suffix

Employer Name

Street Address

45 Broad St

Cumberland

City

Town of Cumberland

ΜI

E

Prefix First Name

Street Address

Cumberland

City

Thomas

2970 Mendon Rd, Unit 123

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
			tributor Information	~ ~~	I		er Data	
Prefix	First Name Nicholas	MI J.	Last Name or PAC/Party Committee Name Hemond	Suffix	Employer Na Cox Commun			
Street	Address	J.	Hemond		Street Addre			
	asant Valley Pkwy				9 JP Murphy			
City	,,		State Zip		City	,	State	Zip
Provide	nce		RI 02908		West Warwick	k	RI	02893
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/28/2021	-		750.00
			In Kind/Other Receipts De	scription				
			tributor Information				er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
C44	Rosalin Address		Hemandez		Global Star S			
	Address at Cheer Ave				Street Addre 1955 Westmir			
City	i checi Ave		State Zip		City	ister St	State	Zip
Provide	ence		RI 02909		Providence		RI	02909
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/04/2021			1,000.00
			In Kind/Other Receipts De	scription				
	71 . 37		tributor Information	C 88			er Data	
Prefix	First Name Wilfred	MI K.	Last Name or PAC/Party Committee Name Hill	Suffix	Employer Na Wilfred's Sea			
Street	Address	K.	11III		Street Addre	-		
96 Pars					805 Cumberla			
City			State Zip		City		State	Zip
•	ingstown		RI 02892		Woonsocket		RI	02895
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/24/2021	_		100.00
			In Kind/Other Receipts De	scription				
							_	
D C	Tr' 4 NI		tributor Information	C CC	I I N		er Data	
Prefix	First Name Joyce	MI A.	Last Name or PAC/Party Committee Name Hindle Koutsogiane	Suffix	Employer Na Retired School			
Street	Address	A.	Timule Koutsografie		Street Addre	_		
	Lickory Dr				3 Old Hickory			
City			State Zip		City	, 21	State	Zip
Cumber	rland		RI 02864-3317		Cumberland		RI	02864-3317
Item	Transaction Type		Contribution Type	R	Leceipt Date	Deposit Date	Co	ntribution Amount
Item								
Item	Check		Individual		04/06/2021	Deposit Date		1,000.00

Zip

02835

Suffix

Employer Name

Full Circle, Inc.

Street Address 486 Dry Bridge Rd

North Kingstown

City

Employer Data

Zip

02852

State

RI

Contributor Information

Hoffman

Last Name or PAC/Party Committee Name

State

RI

ΜI

P.

Prefix First Name

85 Sloop St City

Jamestown

Kevin Street Address

Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 06/14/2021	Contribution Amount 250.00
		In Kind/Other Receipts Do	escription	
D 6	TH 4 37	Contributor Information		loyer Data
Prefix	First Name William	MI Last Name or PAC/Party Committee Name F. Holt	Suffix Employer Name Law Office of William F. Holt	
Street A	Address	r. Hot	Street Address	
	ley Blvd.		1215 Reservoir Ave	
City	icy Divo.	State Zip	City	State Zip
Cransto	n	RI 02910	Cranston	RI 02920
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/21/2021	200.00
		In Kind/Other Receipts Do	escription	
n -	711 37	Contributor Information		loyer Data
Prefix	First Name Linda	MI Last Name or PAC/Party Committee Name E. Hurley	Suffix Employer Name CODAC	
S44 A		E. Hurley		
	Address Ihurst Ave		Street Address 1052 Park Ave	
City	must Ave	State Zip	City	State Zip
Provide	nce	RI 02908	Cranston	RI 02910
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
Ttelli	Credit/Debit Card	Individual	06/21/2021	250.00
		In Kind/Other Receipts Do	escription	
		Contributor Information		loyer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	C d.
C44 A	Donald	Iannazzi	RI Public Employees Benefit	runds
	Address Palm Grove Pl		Street Address 50 Service Avenue	
City	ann Giove II	State Zip	City	State Zip
•	alm Beach	FL 33418	Warwick	RI 02886
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
Tiem .	Check	Individual	06/21/2021	200.00
		In Kind/Other Receipts Do	escription	
		_	_	
		Contributor Information	•	loyer Data
Prefix		MI Last Name or PAC/Party Committee Name	Suffix Employer Name	
	John	J. Igliozzi	Providence CIty Council	
	Address		Street Address	
_	on Memorial Dr	6	25 Dorrance St	St. t. 7.
City Provide	nce	State Zip RI 02909	City Providence	State Zip RI 02903
Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 06/17/2021	Contribution Amount 250.00
	CHOCK	In Kind/Other Receipts Do		250.00
		Contributor Information	T	loyer Data

ΜI

R.

Iovini

Last Name or PAC/Party Committee Name

State

RI

Zip 02809

Suffix

Esq.

Employer Name

Street Address

70 Industrial Rd

Cumberland

City

Dean Warehousing Services

State

RI

Zip

02864

Prefix First Name

Street Address

City

Bristol

15 Ocean View Rd

Joseph

Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 04/06/2021	Deposit Date	Co	ntribution Amount 250.00
			In Kind/Other Receipts De	scription				
			tributor Information	~ ~~	I	Employ	er Data	
Prefix	First Name Raymond	MI M.	Last Name or PAC/Party Committee Name Ivers	Suffix	Employer N	(ame Renewables LLC		
Street	Address	IVI.	ivers		Street Addr			
9 Pearl					73 Shun Pik			
City	., 2		State Zip		City		State	Zip
Franklin	n		MA 02038-1286		Johnston		RI	02919
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021	-		100.00
			In Kind/Other Receipts De	scription				
		_					_	
Day C	First Name		tributor Information	CCC	F N	Employ	er Data	
Prefix	J. Russell	MI	Last Name or PAC/Party Committee Name Jackson	Suffix	Employer N	vame Holbrook Jackson		
Street A	Address		Jackson		Street Addr			
	ier Terrace				122 Touro S			
City			State Zip		City	-	State	Zip
Newpor	rt		RI 02840		Newport		RI	02840
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021			1,000.00
			In Kind/Other Receipts De	scription				
		-				ъ.	D (
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Henx	Robert	B.	Jacquard	Sumx		of Robert B. Jacquar	d. Esa.	
Street A	Address				Street Addr	_	-, -	
	amore Rd				949 Park Av			
City			State Zip		City		State	Zip
Cransto	on		RI 02920		Cranston		RI	02910
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
						ъ.	D (
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Пепх	William	N.	Janikies	Sumx	The Jan Con			
Street A	Address	11.	summes		Street Addr	_		
61 Shar						sset Cross Road		
City			State Zip		City		State	Zip
Coventr	ry		RI 02816		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/22/2021			250.00
			In Kind/Other Receipts De	scription				
			tributor Information				er Data	

State

RI

Zip 02905

Jerzyk

Suffix

Employer Name

Street Address

PO Box 25432

Providence

City

William A Farrell & Associates

State

RI

Zip

02905

Prefix First Name

Street Address

City

Cranston

88 Woodbury Rd

Matt

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/15/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts D	Description				
			- a				.	
D C	F' N		or Information	C . CC	I E I N	Employ	er Data	
Prenx	First Name Heather	MI Last M. John	Name or PAC/Party Committee Name	Suffix	Employer N Greenleaf	ame		
Street A					Street Addr	ress		
87 Crest					1637 W. Ma			
City			State Zip		City		State	Zip
Portsmou	ıth		RI 02871		Portsmouth		RI	02871
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/10/2021			100.00
			In Kind/Other Receipts D	Description				
		Contailer	on Information			F1	an Data	
Prefix	First Name		or Information Name or PAC/Party Committee Name	Suffix	Employer N	Employe Jame	er Data	
Tiena	Marie		s-Bridges	Julia	United Heal			
Street A	ddress				Street Addr	ess		
25 Colon	ial Dr				475 Kilvert	St		
City			State Zip		City		State	Zip
Lincoln			RI 02865-1541		Warwick		RI	02886
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			500.00
			In Kind/Other Receipts D	Description				
		Contribute	or Information			Employ	or Data	
Prefix	First Name		Name or PAC/Party Committee Name	Suffix	Employer N		. Data	
	Karen	B Kane	_			operty Management		
Street A	ddress				Street Addr	ess		
174 Wick	cford Point Road				20 Newman	Ave # 1105,		
City			State Zip		City		State	Zip
North Ki	ngstown		RI 02852		Rumford		RI	02916
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/30/2021			1,000.00
			In Kind/Other Receipts D	Description				
		Contribute	or Information			Employ	er Data	
Prefix	First Name		Name or PAC/Party Committee Name	Suffix	Employer N		. Data	
	Arnold		fman		Kaufman Pr			
Street A	ddress				Street Addr	ess		
PO Box	1384				187 North M	Iain Street		
City			State Zip		City		State	Zip
Providen	ce		RI 02901		Providence		RI	02903
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. C.		05/27/2021			500.00
			In Kind/Other Receipts D	escription				
			_	_				
		Contribute	or Information			Employ	er Data	

State

MA

Suffix

Zip 01590-1335

Employer Name

Street Address

211 Granite St

State

MA

Zip

01607

City

Worcester

Linder's Inc

ΜI

Kawolis

F

Prefix First Name

Street Address

95 W. Sutton Rd

City

Sutton

Paul

Item	Transaction Type Check		Contribution Type Individual	F	Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts Do	escription				
		~						
D 6	E' 431		tributor Information	C . CC	TE 1 37	Employer	Data	
Prefix	First Name Janice	MI M	Last Name or PAC/Party Committee Name Kearney	Suffix	Employer No.	ame gineering Company, Inc		
Street A	Address	141	Realicy		Street Addre			
	rass Drive				1	t, Warwick, RI 02888		
City	Stass Dilve		State Zip		City	i, warwick, 1d 02000	State	Zip
•	Kingstown		RI 02879		Warwick		RI	02888
						D 11D 1		
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/06/2021			500.00
			In Kind/Other Receipts Do	escription				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
Tienx	Michael	J.	Keller	Sum	Info Request			
Street A	Address	•.			Street Addre			
	ost Road, Unit 6				Sireet Autire	-33		
City	osi Road, Omi o		State Zip		City		State	Zip
•	reenwich		RI 02818		City		State	Zip
Item	Transaction Type		Contribution Type	Б	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts Do	escription				
		C	tributor Information			F1	D-4-	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employer	Data	
Tienx	Steven	P.	Kelly	Sum	Timberline C			
Street A	Address	•	realy		Street Addre			
47 Addi					300 Pine St	:55		
	ISON St		State 7in				State	7 in
City Braintre	22		State Zip MA 02184		City Canton		State MA	Zip 02021
Diamire								
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			1,000.00
			In Kind/Other Receipts De	escription				
			. 7 . 7				ъ.	
D 6	To a No		tributor Information	0.00	Tr 1 37	Employer	Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Robert	Kock	y Kempenaar		Kempenaar F			
	Address				Street Addre			
	est Main Rd				351 W Main	Kd		
City			State Zip		City		State	Zip
Middlet	town		RI 02842		Middletown		RI	02842
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/29/2021			1,000.00
			In Kind/Other Receipts De	escription				
overlin	nit refunded 7-16-21							
			tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Peter		Kiernan		Kiernan Vent	ures		
64 4 4	4 1 1				10			

Zip 06831

State

CT

Street Address

City

New York

590 Madison Avenue

Zip 10022

State

NY

428 Round Hill Road

Street Address

City

Greenwich

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date Dep 06/29/2021	osit Date	Cor	ntribution Amount
			In Kind/Other Receipts De					2,000.00
over li	mit - refunded 7/16/21		·	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name Peter	MI	Last Name or PAC/Party Committee Name Kiernan	Suffix	Employer Name Kiernan Ventures			
Street A 428 Ro	Address and Hill Road				Street Address 590 Madison Avenu	ie		
City			State Zip		City		State	Zip
Greenw	rich		CT 06831		New York		NY	10022
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date Dep 06/30/2021	osit Date	Con	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
overlin	nt refunded 7-16-21							
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
S44 /	Peter		Kiernan		Kiernan Ventures			
	Address und Hill Road				Street Address 590 Madison Avenu			
City	und rim Road		State Zip		City	ie	State	Zip
Greenw	rich		CT 06831		New York		NY	10022
Item	Transaction Type		Contribution Type	D		osit Date		ntribution Amount
Hein	Check		Individual		04/12/2021	osit Date	Col	200.00
	Check		In Kind/Other Receipts De		0 1/12/2021			200.00
			in think out it receips be	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
Dr.	Brian		Kiley		Atlantic Family Eye	e Care		
	Address hmore Rd				Street Address 2345 Mendon Rd			
City			State Zip		City		State	Zip
Cransto	n		RI 02905		Cumberland		RI	02864
Item	Transaction Type		Contribution Type	R	eceipt Date Dep	osit Date	Cor	ntribution Amount
	Check		Individual		04/06/2021			1,000.00
			In Kind/Other Receipts De	escription				
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	,		
C44 /	Patrick Address		Kilroy		Coastal Farms, LLC Street Address			
	anklin St				66 Kingstown Rd			
City	ankini St		State Zip		City		State	Zip
Newpor	rt		RI 02840		Richmond		RI	02898
Item	Transaction Type		Contribution Type		eceipt Date Dep	osit Date		ntribution Amount
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	p.o.j.		
	Michael	L.	Kinch		State of RI - DMV			
Street A	Address				Street Address			
25 Mur	phy Dr.				82 Smith St			
City			State Zip		City		State	Zip
Cumber	rland		RI 02864		Providence		RI	02903

Item	Transaction Type Check	Contribution Type Individual	Receipt Da 04/01/202	•	Co	ntribution Amount 250.00
		In Kind/Other Receipts De	scription			
D C E		Contributor Information	0.65 15 1		yer Data	
Prefix Fi	irst Name revor	MI Last Name or PAC/Party Committee Name Kinney		er Name Healthcare		
Street Add		Killiney	Street A			
825 Swamp			101 E S			
City		State Zip	City		State	Zip
Coventry		RI 06238-1440	Kennett	Square	PA	18348
Item	Transaction Type	Contribution Type	Receipt Da		Co	ntribution Amount
Item	Check	Individual	06/04/202		Cu	500.00
	Olioca	In Kind/Other Receipts De				500.00
						
		Contributor Information		Employ	yer Data	
Prefix Fi	irst Name	MI Last Name or PAC/Party Committee Name	Suffix Employ	er Name		
Jo	oseph	Kishfy	Madison	n Investment		
Street Add	ress		Street A	Address		
15 Paddock	c Dr		One Mo	rning Star Court		
City		State Zip	City		State	Zip
Lincoln		RI 02865	Lincoln		RI	02865
Item	Transaction Type	Contribution Type	Receipt Da	te Deposit Date	Co	ntribution Amount
	Credit/Debit Card	Individual	06/21/202	1		200.00
		In Kind/Other Receipts De	scription			
		Contributor Information			yer Data	
	irst Name anja	MI Last Name or PAC/Party Committee Name Kubas-Meyer		er Name ition for Children and Fa	ili	
Street Add		Kubas-ivieyei			minnes	
40 Centenn			Street A	vells Avenue		
City		State Zip	City	rens 21 venue	State	Zip
Barrington		RI 02806	Provide	nce	RI	02909
Item	Transaction Type	Contribution Type	Receipt Da	te Deposit Date	Co	ntribution Amount
Hein	Check	Individual	04/06/202	-	Cu	500.00
	Check	In Kind/Other Receipts De		.1		500.00
		in this other recepts by	octipuon.			
		Contributor Information		Employ	yer Data	
Prefix Fi	irst Name	MI Last Name or PAC/Party Committee Name	Suffix Employ	er Name		
N	icholas	LaCroix	Mediflo	r Organics, Inc.		
Street Add	ress		Street A	ddress		
48 Collins A	Ave		337 Pos	t Road		
City		State Zip	City		State	Zip
East Green	wich	RI 02818	Warwic	k	RI	02886
Item	Transaction Type	Contribution Type	Receipt Da	te Deposit Date	Co	ntribution Amount
	Check	Individual	05/20/202	1		500.00
		In Kind/Other Receipts De	scription			
		Contributor Information			yer Data	
			o on 1 -	**		
Prefix Fi	irst Name	MI Last Name or PAC/Party Committee Name	Suffix Employ	er Name	_	

Steven J. Lafazia Construction, Inc.

State

RI

Zip

02816

Street Address

5 Pine Lane

Coventry

City

Steven

Street Address 17 Belvedere St

City

Johnston

J.

Lafazia

State

RI

Zip

02919

Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Contribution Amoun
	Check		Individual		06/23/2021		1,000.00
In Kind/Other Receipts Description							
Contributor Information						Employer	Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	me	
	David		LaHousse		Kay's Restaura	ent	

		tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David		LaHousse		Kay's Restaurant		
Street A	Address				Street Address		
106 Rid	ge St				1015 Cass Ave		
City			State Zip		City	State	Zip
Woonso	ocket		RI 02895		Woonsocket	RI	02895
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		04/08/2021		1,000.00

		tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Karen	L.	Lally		Charlesgate Nursing Center		
Street A	Address				Street Address		
479 Ro	and Top Rd				100 Randall St		
City			State Zip		City	State	Zip
Harrisv	ille		RI 02830		Providence	RI	02904
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/16/2021		7.00

In Kind/Other Receipts Description

		Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Bonnie		Large		Diamond Hill Appraisors		
Street A	Address				Street Address		
106 Abl	bott Run Valley Rd				106 Abbott Run Valley Rd		
City			State Zip		City	State	Zip
Cumber	rland		RI 02864		Cumberland	RI	02864
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		04/20/2021		1,000.00

In Kind/Other Receipts Description

		Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	David	R.	Larivee		Northeast Noise Abatement Corp.		
Street A	Address				Street Address		
36 Gree	36 Green Meadow Lane 33 Alf						
City			State Zip		City	State	Zip
Cumber	land		RI 02864-2224		Warwick	RI	02889
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/04/2021		200.00

In Kind/Other Receipts Description

		Employer Data						
Prefix	First Name	MI	Last Name or PAC/Party Con	nmittee Name	Suffix	Employer Name		
	Douglass	G.	Lasko			Retired		
Street A	Street Address					Street Address		
82 Prese	ervation Way					82 Preservation Way		
City			State	Zip		City	State	Zip
South K	ingstown		RI	02879		South Kingstown	RI	02879

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/17/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
			tributor Information		,	Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
_	Cathleen	M.	Laverty		Homemaker			
Street A					Street Addre			
	ns Grant Dr		~ ~.		15 Jasons Gr	ant Dr	~	
City	11		State Zip		City		State	Zip
Cumber			RI 02864-1650		Cumberland		RI	02864-1650
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
		~					D /	
D C	Einst Name		tributor Information	0	Tr 37	Employer	Data	
Prefix	First Name George	MI J.	Last Name or PAC/Party Committee Name Lazieh	Suffix	Employer N	ame of Steven B. Stein		
C44 A		J.	Lazien		Street Addre			
Street A	rman Farm Rd				400 Westmin			
City	iman raim Ku		State Zip		City	ister St, F13	State	7in
Cumber	land		RI 02864		Providence		RI	Zip 02903
					·			
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 05/03/2021	Deposit Date	Co	ntribution Amount 500.00
	CHECK				03/03/2021			300.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
Titula	Eduardo	P.	Leandres	Suma		ced Auto Recycling		
Street A	ddress				Street Addre			
	ge Circle				290 Curran F			
City			State Zip		City		State	Zip
Milford			MA 01757		Cumberland		RI	02864
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		04/22/2021	2 · p · s · s · s · s · s · s · s · s · s		1,000.00
			In Kind/Other Receipts De					,
			•	•				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Lawrence	C.	LeBlanc			es Development Corp.		
Street A	Address				Street Addre	ess		
PO Box	1299				PO Box 1299	9		
City			State Zip		City		State	Zip
Charles	town		RI 02813		Charlestown		RI	02813
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/17/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De					200.00
			III IIII OIII IIII III	Prion				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
		_			1,			

Jr.

Zip 02809

State

RI

Street Address

City

Providence

54 Stonelaw Ave

RI Liberian Foundation for Education and Cultural Initiatives

Zip 02908

State

RI

Edward

Street Address

6 Normand St

City

Bristol

H.

Lee

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/21/2021	Deposit Date	Contribution Amount
			In Kind/Other Receipts De	scription			
		Con	tributor Information			Employe	r Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame	

		Con	tributor Information		Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Rosemanise		Lefevre		Hudson Group		
Street A	Address				Street Address		
335 Ch	estnut Farm Way				1 Meadowlands Plaza		
City			State Zip		City	State	Zip
Raynha	m		MA 02767		East Rutherford	NJ	07073
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/11/2021		500.00

		Employer Data					
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	James	M.	Lehane	Ш	Newport Mental Health		
Street A	Address				Street Address		
213 Tuc	kerman Ave				127 Johnny Cake Hill Rd		
City			State Zip		City	State	Zip
Middlet	own		RI 02842		Middletown	RI	02842
Item	Transaction Type		Contribution Type	R	eceipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/15/2021		1,000.00

In Kind/Other Receipts Description

		tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Michael		Lemoi		Energy First, Inc.		
Street A	Address				Street Address		
401 E.	Las Olas Blvd., Ste 1400				401 E. Las Olas Blvd., Ste 1400		
City			State Zip		City	State	Zip
Ft. Lau	derdale		FL 33301		Ft. Lauderdale	FL	33301
Item	Transaction Type		Contribution Type	I	Receipt Date Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021		200.00

In Kind/Other Receipts Description

		tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	James	J	Lepore		Coia & Lepore		
Street A	Address				Street Address		
201 Joh	n Mowry Road				226 South Main Street		
City			State Zip		City	State	Zip
Smithfie	eld		RI 02917		Providence	RI	02903
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	C	ontribution Amount
	Credit/Debit Card		Individual		06/14/2021		100.00

In Kind/Other Receipts Description

		Cont	tributor Information				Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party (Com	nittee Name	Suffix	Employer Name			
	Jerry		Leveille				Retired			
Street A	Address						Street Address			
70 Map	le Dr						70 Maple Dr			
City			Sta	ate	Zip		City	State	Zip	
Harrisvi	ille		RI		02830		Harrisville	RI	02830	

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 05/19/2021	Deposit Date	Ca	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
						т.	D 4	
Drofin	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
rrenx	Thomas	E.	Lisi	Sumx	Marcum LL			
Street A	Address				Street Addr	ess		
783 Gre	eat Road				155 South M	fain St, Ste 100		
City			State Zip		City		State	Zip
Lincoln	ı		RI 02865-5114		Providence		RI	02903
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 04/18/2021	Deposit Date	Co	ntribution Amount
	Credit Debit Cuit		In Kind/Other Receipts De		01/10/2021			1,000.00
		Cont	ributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
_	Cristina		Llorente		Cymbidium			
	Address				Street Addr 6540 SW 72			
City	W 72nd Court		State Zip		6340 SW 72 City	na Court	State	Zip
Miami			FL 33143		Miami		FL	33143
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date		ntribution Amount
	Credit/Debit Card		Individual		04/16/2021			1,000.00
			In Kind/Other Receipts De	scription				
							.	
Prefix	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
гтепх	Michael	MII	Llorente	Sumx	LSN Partner			
Street A	Address				Street Addr	ess		
10905 \$	SW 85th Avenue				801 Arthur C	Godfrey Road, #401		
City			State Zip		City		State	Zip
Miami			FL 33156		Miami Beac	h	FL	33140
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/15/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Data	
	Charles		Lombardi			h Providence		
Street A	Address				Street Addr	ess		
30C Nij	pmuc Trail				2000 Smith	St		
City			State Zip		City		State	Zip
North P	Providence		RI 02904		North Provid	dence	RI	02911
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/07/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Conf	ributor Information			Employe	n Data	

MI

Longo

F.

Prefix First Name

Street Address

293 Varnum Dr

East Greenwich

City

Joseph

Last Name or PAC/Party Committee Name

State

RI

Zip

02818

Suffix

Employer Name

Street Address

165 Frenchtown Rd

North Kingstown

Auto Service Auto Body

Zip

02852

State

RI

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/14/2021	Deposit Date	Co	ntribution Amount 100.00
			In Kind/Other Receipts De	scription				
		_						
D 6	Tr. ANI		tributor Information	0.00	T. 1 1	Employ	er Data	
Prefix	First Name Christine	MI	Last Name or PAC/Party Committee Name Losea	Suffix	Employer N Blackstone V	(ame Valley Prep Academy	v.	
Street A					Street Addr		,	
	le Pond County Rd				7 Fatima Dr			
City			State Zip		City		State	Zip
Cumber	land		RI 02864		Cumberland	l .	RI	02864
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/16/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	David	J.	Lucier		Lucier CPA,	Inc.		
Street A	address				Street Addr	ress		
	nberry Ter				1308 Atwoo	d Ave		
City			State Zip		City		State	Zip
Cranston	n		RI 02921		Johnston		RI	02919
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. P. J. P		05/19/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Richard		Lundberg		P. J. Keating	Co.		
Street A					Street Addr			
PO Box	252				998 Reservo	or Rd		
City Ashburn	1		State Zip MA 01430		City		State MA	Zip 01462
					Lunenberg			
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/14/2021			500.00
			ii Kiiu/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Benjamin		Lupovitz		RIBI			
Street A					Street Addr			
_	Garden Way				14 Internation	onal Way		
City			State Zip		City		State	Zip
East Gre			RI 02818		Warwick		RI	02886
Item	Transaction Type Check		Contribution Type Individual		04/29/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De					

Employer Data

Zip

02864-1639

State

RI

Contributor Information

Lynch

J.

Prefix First Name

Street Address

Cumberland

City

6 Cobblestone St

Michelle

Last Name or PAC/Party Committee Name

State

RI

Zip

02864-1639

Suffix

Employer Name

Homemaker

Cumberland

City

Street Address

6 Cobblestone St

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 04/28/2021	Deposit Date	Co	atribution Amount 500.00
			In Kind/Other Receipts De	scription				
		_					_	
			tributor Information		T=		yer Data	
	First Name Frisha	MI	Last Name or PAC/Party Committee Name Lynch	Suffix	Employer N Homemaker	ame		
Street Add			Dynch .		Street Addre	955		
85 Taggari					85 Taggart C			
City			State Zip		City		State	Zip
East Green	nwich		RI 02818		East Greenw	rich	RI	02818
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	atribution Amount
	Check		Individual In Kind/Other Receipts De		06/23/2021			500.00
			ii Kiid/Other Receipts De	er ibnon				
		Con	tributor Information			Employ	yer Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
7	Villiam	J.	Lynch		WJ Lynch La	aw		
Street Add					Street Addre			
35 Pequot	Rd				320 Newport	t Ave		
City			State Zip		City		State	Zip
Pawtucket			RI 02861		Rumford		RI	02916
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	atribution Amount
	Check		Individual		04/27/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
Ι	David	C.	Lynch	Sr.	JH Lynch an	d Sons		
Street Add					Street Addre			
85 Taggari	t Court				50 Lynch Pla	ice		
City			State Zip		City		State	Zip
East Green			RI 02818		Cumberland		RI	02864
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		04/29/2021			1,000.00
			III Killa/Other Receipts De	scription				
		Con	tributor Information			Emplo	yer Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		•	
J	ason		Macari		Macari Baby	Inc		
Street Add	dress				Street Addre	ess		
3100 Dian	nond Hill Rd				30 Maltin St			
City			State Zip		City		State	Zip
Cumberla			RI 02864		Cumberland		RI	02864
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 05/27/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De	scription				

Employer Data

Zip

63367

State

MO

Contributor Information

Macia

Prefix First Name

Street Address

4 Windsor Lane

City

Kirkwood

Alaina

Last Name or PAC/Party Committee Name

State

MO

Zip

63122

Suffix

Employer Name

Street Address

City

St. Louis

16 Hawk Ridge Drive Lake

Medical Transportation Management, Inc.

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 150.00
			In Kind/Other Receipts De	scription				
			2.76			F 1	D (
Prefix Firs	et Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Mar		F.	Maciel Maciel	Sum	Retired	ame		
Street Addre	ess				Street Addr	ess		
700 Armistice	e Blvd.				700 Armistic	ce Blvd.		
City			State Zip		City		State	Zip
Pawtucket			RI 02861		Pawtucket		RI	02861
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/26/2021			500.00
			In Kind/Other Receipts De	scription				
		~					-	
D. C. E.	-4 N		ributor Information	Suffix	FN	Employ	er Data	
Prefix Firs	st Name	MI L.	Last Name or PAC/Party Committee Name Maggiacomo	Esq.	Employer N	rame of Edward L. Maggia	acomo	
Street Addre		L.	Maggiacomo	Lsq.	Street Addr		icomo	
PO Box 8459					PO Box 845			
City			State Zip		City		State	Zip
Cranston			RI 02920		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021	_		1,000.00
			In Kind/Other Receipts De	scription				
D 6 DI			ributor Information	~ ***		Employ	er Data	
	st Name onio	MI	Last Name or PAC/Party Committee Name Maglioli	Suffix	Employer N Euro Auto B			
Street Addre			Magnon		Street Addr			
327 Delano D					938 Main St			
City			State Zip		City		State	Zip
North Kingsto	own		RI 02852		West Warwi	c k	RI	02893
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/15/2021	-		50.00
			In Kind/Other Receipts De	scription				
			ributor Information			Employ	er Data	
	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street Addre	ureen	E	Maigret		State of Rho Street Addr			
415 Larchwo					82 Smith Str			
City	od Biive		State Zip		City		State	Zip
Warwick			RI 02886		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		05/25/2021		20	1,000.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	

State

RI

Zip 02882

Mainelli

Prefix First Name

42 Clubhouse Drive

Street Address

Narragansett

City

Josephine

Suffix

Employer Name

Street Address

Narragansett

42 Clubhouse Drive

State

RI

Zip

02882

Retired

City

Item	Transaction Type Check		Contribution Type Individual	e		eceipt D ate 04/08/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Oth	er Receipts De	scription				
D C E	·	Contributor Inform		*** 37	C . CC	F 1 3	Employ	er Data	
Prefix F	irst Name LR	MI Last Name or Mainelli	r PAC/Party Com	imittee Name	Suffix III	Employer N Aetna Bridg			
Street Add		Wallelli			***	Street Addr			
42 Clubhou						30 Lockbrid			
City	isc Diffe		State	Zip		City	ge Succi	State	Zip
Narraganse	•tt		RI	02882		Pawtucket		RI	02860
					р		D		
Item	Transaction Type Check		Contribution Type Individual	e		eceipt D ate 04/12/2021	Deposit Date	Co	ntribution Amount 200.00
	CHECK			er Receipts De		04/12/2021			200.00
			III KIIIG/Oth	er Receipts De	scription				
		Contributor Inform	ation				Employ	er Data	
Prefix F	irst Name		r PAC/Party Com	mittee Name	Suffix	Employer N		2	
	oan	M. Malloy				Retired	-		
Street Add	lress					Street Addr	ess		
27 Red Gat	te Rd					27 Red Gate	Rd		
City			State	Zip		City		State	Zip
Cumberlan	d		RI	02864-5010		Cumberland		RI	02864-5010
Item	Transaction Type	(Contribution Type	e	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check	I	ndividual		(04/20/2021	_		200.00
			In Kind/Oth	er Receipts De	scription				
		Contributor Inform	nation				Employ	er Data	
	irst Name		r PAC/Party Com	ımittee Name	Suffix	Employer N			
	homas	J. Malloy					& Sons Energy		
Street Add						Street Addr			
29 Angell I	Rd					106 Scott Ro	i		
City			State	Zip		City		State	Zip
Cumberlan	.d		RI	02864		Cumberland		RI	02864
Item	Transaction Type	(Contribution Type	e		eceipt Date	Deposit Date	Co	ntribution Amount
	Check	I	ndividual			05/24/2021			500.00
			In Kind/Oth	er Receipts De	scription				
		Contributor Inform	-4:				Employ	ou Doto	
Prefix F	irst Name		r PAC/Party Com	mittas Nams	Suffix	Employer N		er Data	
	nn	T. Mancini	TACITALLY COM	imitice Ivaine	Suilla	Retired	mile		
Street Add		1. 1/111101111				Street Addr	229		
563 Natick						563 Natick I			
City			State	Zip		City		State	Zip
Cranston			RI	02921		Cranston		RI	02921
Item	Transaction Type		Contribution Type	ρ.	R.	eceipt Date	Deposit Date	Co	ntribution Amount
rem	Check		ndividual			05/25/2021	Deposit Date	Cu.	1,000.00
		_		er Receipts De					
		Contributor Inform	nation				Employ	er Data	
Prefix F	irst Name		r PAC/Party Com	ımittee Name	Suffix	Employer N			
17		T Mamaini	-			Manaini Car			

Mancini Companies

119 Hopkins Hill Rd

State

RI

Zip

02817

Street Address

West Greenwich

Kenneth

Street Address

West Greenwich

City

119 Hopkins Hill Rd

J.

Mancini

State

RI

Zip

02817

Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/25/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_					_	
			tributor Information	~	I		yer Data	
Prefix	First Name Raymond	MI T.	Last Name or PAC/Party Committee Name Mancini	Suffix Jr.	Employer N Mancini Con			
Street A	•	1.	Walkin	31.	Street Addr	-		
	en Circle				119 Hopkins			
City			State Zip		City		State	Zip
Cransto	n		RI 02921		West Greenv	wich	RI	02817
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/24/2021	_		1,000.00
			In Kind/Other Receipts De	scription				
			tributor Information				yer Data	
Prefix	First Name Raymond	MI T.	Last Name or PAC/Party Committee Name Mancini	Suffix Sr.	Employer N Mancini Con			
Street A	_	1.	Mancini	SI.	Street Addr	-		
PO Box					119 Hopkins			
City			State Zip		City		State	Zip
Covent	гу		RI 02816		West Green	wich	RI	02817
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/24/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information				yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Deborah		Mancini-Morrocco		Mancini Con	-		
Street A	Address berly Lane				Street Addr 119 Hopkins			
City	ocity Lanc		State Zip		City	i i i i i i i i i i i i i i i i i i i	State	Zip
Cransto	n		RI 02921		West Greens	vich	RI	02817
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
Item	Check		Individual		04/26/2021	Deposit Date	Cu	500.00
			In Kind/Other Receipts De	scription				
			•	•				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Marc	E.	Marandola			etal Finishing		
Street A					Street Addr			
	and Farm Rd		6 7.		189 Georgia	Ave	64.4	7: _
City East Gr	eenwich		State Zip RI 02818		City Providvence		State RI	Zip 02905
				_	<u> </u>			
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		06/21/2021	Deposit Date	Со	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				

Employer Data

State

RI

Zip

02917

Contributor Information

Marino

Prefix First Name

Street Address

City

Providence

36 Harwich Road

Peter

Last Name or PAC/Party Committee Name

State

RI

Zip

02906

Suffix

Employer Name

Street Address

City

Smithfield

910 Douglas Pike

Neighborhood Health Plan

Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amo
	Check		Individual		05/12/2021		500.
			In Kind/Other Receipts De	scription			
		Con	tributor Information		Employ	an Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	er Data	
Frenx	Christopher	MII	Marsella	Sumx	Marsella Development Corporati	on	
C44	Address		WidiSchia		Street Address	OII	
	nefit St. Unit 3				1 Citizens Plaza		
City	nent St, Olit S		State Zip		City	State	Zip
Provide	ence		RI 02903		Providence	RI	02903
Item	Transaction Type		Contribution Type	D	Receipt Date Deposit Date	Co	ntribution Amo
Item	Credit/Debit Card		Individual		06/02/2021	Cu	500.
	CICAL DOOL CALL		In Kind/Other Receipts De		00,00,0001		500.
			In Inna Other Receipts De	oct iption			
		Con	tributor Information		Employ	er Data	
Prefix	First Name	Con	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer Name	er Data	
Prefix	First Name Christopher			Suffix			
			Last Name or PAC/Party Committee Name	Suffix	Employer Name		
Street A	Christopher		Last Name or PAC/Party Committee Name	Suffix	Employer Name Marsella Development Corporati		
Street A	Christopher Address		Last Name or PAC/Party Committee Name	Suffix	Employer Name Marsella Development Corporati Street Address		Zip
Street A	Christopher Address nefit St, Unit 3		Last Name or PAC/Party Committee Name Marsella	Suffix	Employer Name Marsella Development Corporati Street Address 1 Citizens Plaza	on	Zip 02903
Street A 188 Ber City	Christopher Address nefit St, Unit 3		Last Name or PAC/Party Committee Name Marsella State Zip		Employer Name Marsella Development Corporati Street Address 1 Citizens Plaza City	on State RI	-

		Con	tributor Information		Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Terrance	S.	Martiesian		Martiesian & Associates			
	Address ident Ave				Street Address 159 Elmgrove Ave			
City			State Zip		City	State	Zip	
Provide	nce		RI 02906		Providence	RI	02906	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount	
	Check Individual				06/23/2021		500.00	

In Kind/Other Receipts Description

		Con	tributor Information		Emp	ployer Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
	David	P	Martland		Silva, Thomas, Martland & O	Offenberg, Ltd.
Street A	Address				Street Address	
4 Cogge	eshall Avenue				1100 Aquidneck Avenue	
City			State Zip		City	State Zip
Newpor	t		RI 02840		Middletown	RI
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Contribution Amount
	Check		Individual		06/21/2021	1,000.00

In Kind/Other Receipts Description

		Con	tributor Information				Employer Data			
Prefix							Employer Name			
	Janice	M.	Mathews				The Jan Companies			
Street A	Street Address						Street Address			
20 Narra	agansett Ave, #206						35 Sockanosset Cross Road			
City	City				Zip		City	State	Zip	
Narraga	Narragansett			RI	02882		Cranston	RI	02920	

Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date Deposit Date 06/14/2021	Contribution Amount
		In Kind/Other Receipts	Description	
				_
D. C	Fig. 4 N	Contributor Information		yer Data
Prenx	First Name Thomas	MI Last Name or PAC/Party Committee Name Matteini	Suffix Employer Name Retired	
Street A			Street Address	
	nd Street		71 Second Street	
City		State Zip	City	State Zip
Garden	City	NY 11530	Garden City	NY 11530
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/19/2021	250.00
		In Kind/Other Receipts	Description	
		Contributor Informatic -	F1	rou Data
Prefix	First Name	Contributor Information MI Last Name or PAC/Party Committee Name		yer Data
Trems	Edward	Mazze	URI	
Street A	Address		Street Address	
52 Horiz	zon Dr		45 Upper College Rd	
City		State Zip	City	State Zip
Saunder	stown	RI 02874	Kingston	RI 02881
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	05/21/2021	250.00
		In Kind/Other Receipts	Description	
		Contributor Information	Fmulo	yer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name		yer Data
	Francis	P. McCabe	State of Rhode Island	
Street A	Address		Street Address	
63 Linde	en Street		82 Smith St	
City		State Zip	City	State Zip
Pawtuck	cet	RI 02861	Providence	RI 02903
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	04/22/2021	500.00
		In Kind/Other Receipts	Description	
		Contributor Information	Fmplo	yer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	_	yei Data
	Lawrence	P. McCarthy	J H Lynch & Sons	
Street A	Address		Street Address	
94 First	Ave		50 Lynch Place	
City		State Zip	City	State Zip
Ostervil	le	MA 02655	Cumberland	RI 02864
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/15/2021	250.00
		In Kind/Other Receipts	Description	
				_
		Contributor Information	L'annier L	yer Data

State

RI

Zip 02889

Suffix

Employer Name

Info Requested

Street Address

State Zip

City

ΜI

McGovern

J.

Prefix First Name

Street Address

26 Hilton Rd

City

Warwick

Mary

Item	Transaction Type Check	Contribution Type Individual				Receipt Date Deposit Date 04/20/2021		Contribution Amount 1,000.00		
			In Kind/Oth	ier Receipts De	scription					
	Contributor Information MI Last Name or PAC/Party Committee Name					Employer Data				
Prefix	First Name Thomas			nmittee Name	Suffix III	Employer N Retired	ame			
		P. McGov	em		ш					
Street Address 26 Hilton Rd						Street Addr 26 Hilton Ro				
	ii Kū		54-4-	7:			u	64-4-	7:-	
City Warwick	,		State RI	Zip 02889		City Warwick		State RI	Zip 02889	
Item	Transaction Type	Contribution Type			Receipt Date Deposit Date			Contribution Amount		
	Check	Individual			06/10/2021				250.0	
			In Kind/Oth	ier Receipts De	escription					
		C	[т.	D (
D C	Einst Name	Contributor I			E	F1- N	Employ	er Data		
Prefix	First Name Joseph	MI Last No M. McGov	ame or PAC/Party Con	nmittee Name	Suffix Jr.	Employer N	ransit Authority			
Street A		W. WEGOV	em		J1.	Street Addr	_			
Street Address 143 Hoffman Ave, Apt 211						705 Elmwoo				
City	mian Ave, Apt 211		State	Zip		City	Ju Ave	State	Zip	
Cranston	1		RI	02920		Providence		RI	02907	
Item	Transaction Type		Contribution Typ	e		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amou	
	Check		Individual	D 1 / D		00/21/2021			200.0	
			In Kind/Oti	ier Receipts De	escription					
		Contributor	Information				Employ	or Data		
Prefix First Name		Contributor Information MI Last Name or PAC/Party Committee Name			Suffix	Employer N		ег Баца		
Anne		T. McMal	•	illittee Ivame	Suma	Homemaker				
Street Address						Street Addr	224			
1 Shady Lane						1 Shady Lan				
City			State	Zip		City		State	Zip	
Barringt	on		RI	02806		Barrington		RI	02806	
Item	Transaction Type		Contribution Typ	16	R	eceint Date	Deposit Date	Co	ntribution Amou	
Check		Individual			Receipt Date Deposit Date 04/09/2021			Contribution Amount 500.00		
	Check			ner Receipts De		0 1/05/2021			500.0	
			III IIII OU	ici iteeeipis Di	scription					
		Contributor Information			Employer Data					
Prefix	First Name		ame or PAC/Party Con	nmittee Name	Suffix	Employer N		_		
	Maureen	P. McMal	-			Info Reques				
Street A	ddress					Street Addr				
51 Glen	Dr									
City			State	Zip		City		State	Zip	
Warwick	τ		RI	02889						
Item	Transaction Type	Contribution Type		Receipt Date Deposit Date		Co	ntribution Amou			
	Check	Individual			04/08/2021			20	500.0	
			In Kind/Oth	ner Receipts De						
					1					
		Contributor Information			Employer Data					
Prefix	First Name		ame or PAC/Party Con	nmittee Name	Suffix	Employer N				
	Michael	P McMahon				Brentwood Nursing Home				

Brentwood Nursing Home

State

RI

Zip

02886

Street Address

4000 Post Rd

City

Warwick

Michael

Street Address

City

Warwick

185 Birkshire Dr

P.

McMahon

State

RI

Zip

02886

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/20/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
		~ .						
D C I	7° 4 31		ributor Information	C CC	I	Employer	Data	
	First Name Theodore	MI J.	Last Name or PAC/Party Committee Name McNayr	Suffix	Employer N Growth Indu			
Street Add		J.	Wicivayi		Street Addr			
95 Talllma					815 Jefferson			
City			State Zip		City	22170.	State	Zip
Cranston			RI 02910		Warwick		RI	02886
Item	Transaction Type		Contribution Type	D	eceipt Date	Deposit Date	Co	ntribution Amount
Item	Check		Individual		04/29/2021	Deposit Date	Cu	500.00
	CHCCK		In Kind/Other Receipts Do		04/23/2021			300.00
			In Island Other Receipts De	scription				
		Cont	ributor Information			Employer	Data	
Prefix F	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Т	Thomas		McNulty			ty Real Estate		
Street Add	dress				Street Addr	ess		
5 Millers I	Brook Dr				573 Meadow	7 Rd		
City			State Zip		City		State	Zip
Cumberlar	nd		RI 02864-6258		Cumberland		RI	02864
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021			250.00
			In Kind/Other Receipts Do	scription				
		Conti	ributor Information			Employer	Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Barry	E.	McPeake		Ann O'Brien	-		
Street Add					Street Addre			
	t Divu.		St-t- 7:-			.u	84-4-	7:
City Narragans	ett		State Zip RI 02882		City Narragansett	•	State RI	Zip 02882
					_			
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/21/2021			150.00
			in Kind/Other Receipts De	scription				
		Cont	ributor Information			Employer	Data	
Prefix F	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Oscar	A.	Mejias			Chamber of Commerce		
Street Add	dress				Street Addr			
11 Anderto	on Ave				1955 Westm	inister St, 2nd F1		
City			State Zip		City		State	Zip
North Prov	vidence		RI 02904		Providence		RI	02909
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/26/2021			50.00
			In Kind/Other Receipts Do	scription				
		Conti	ributor Information			Employer	Data	
Prefix F	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
			Mandan		C-1C E1			

Self-Employed Landlord

State

RI

Zip

02920

Street Address

1 Dean Parkway

City

Cranston

Alexis

Street Address

1 Dean Parkway

City

Cranston

Mendez

State

RI

Zip

Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 04/28/2021	Contribution Amount 1,000.00
		In Kind/Other Receipts	Description	
				-
Duefer I	irst Name	Contributor Information MI Last Name or PAC/Party Committee Nam	e Suffix Employer Name	er Data
	/incent	J. Mesolella	REI, Inc.	
Street Add			Street Address	
27 Paddoc			235 Promenade St ,Ste 140	
City		State Zip	City	State Zip
Lincoln		RI 02865	Providence	RI 02908
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/22/2021	250.00
		In Kind/Other Receipts	Description	
		6		.
Prefix I	First Name	Contributor Information MI Last Name or PAC/Party Committee Nam	e Suffix Employer Name	er Data
	∕arst Name ∕ark	MI Last Name or PAC/Party Committee Nam Mesrobian	Complete Sourcing Solutions, In	c
Street Add		Weston	Street Address	
114 Tupelo			114 Tupelo Trail	
City		State Zip	City	State Zip
Narragans	ett	RI 02882-243	1 Narragansett	RI 02882-2431
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/24/2021	150.00
		In Kind/Other Receipts	Description	
		6		
Prefix I	First Name	Contributor Information MI Last Name or PAC/Party Committee Nam	e Suffix Employer Name	er Data
	Vicholas	Messinger	Not Employed	
Street Add			Street Address	
220 Pond			220 Pond Street	
City		State Zip	City	State Zip
Hopkinton	ı	MA 01748	Hopkinton	MA 01748
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/16/2021	250.00
		In Kind/Other Receipts	Description	
		6 . 7 . 7 6		D (
Prefix I	irst Name	Contributor Information MI Last Name or PAC/Party Committee Nam	Employ e Suffix Employer Name	er Data
	Aichael	Milano	REMAX	
Street Add			Street Address	
4 Evans St			655 Main St	
City		State Zip	City	State Zip
Cumberla	nd	RI 02864	East Greenwich	RI 02818
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/21/2021	200.00
		In Kind/Other Receipts	Description	
		In Kind/Other Receipts Contributor Information	Description Employ	

ΜI

D.

Miller

Last Name or PAC/Party Committee Name

State

RI

Zip

02903

Suffix

Employer Name

Street Address

City

Providence

Advocacy Solutions

4 Richmond Sq, Ste 300

Zip

02906

State

RI

Prefix First Name

Street Address

City

Providence

Alexander

10 Park Row W, Apt 320

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 25.00
			In Kind/Other Receipts D	escription				
						F 1	D (
Profix I	First Name	Contributor I	ame or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	Carol	Miller	ame of TAC/Tarty Committee Name	Sumx	Not Employ			
Street Ad	dress				Street Addr			
196 Old R	Liver Rd, Apt 304				196 Old Riv	er Rd, Apt 304		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/14/2021			1,000.00
			In Kind/Other Receipts D	escription				
		Contributor	Information			Employ	er Data	
Prefix I	First Name		ame or PAC/Party Committee Name	Suffix	Employer N			
I	Kevin	P. Millon	zi		M & M Foo	d Service, LLC		
Street Ad					Street Addr			
	p Farm Dr				25 Belknap	Farm Dr		
City			State Zip		City		State	Zip
Johnston			RI 02919		Johnston		RI	02919
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 1,000.00
	CHECK		In Kind/Other Receipts D		00/21/2021			1,000.00
			* · · ·	-				
		Contributor 1	Information			Employ	er Data	
	First Name		ame or PAC/Party Committee Name	Suffix	Employer N			
	David	A. Mitche	Ш		The Okonite			
Street Add					Street Addr 102 Hilltop			
City	watch		State Zip		City	r.c.	State	Zip
Warwick			NY 10990		Ramsey		NJ	07446
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/28/2021	•		500.00
			In Kind/Other Receipts D	escription				
D 6 1	D' . 31	Contributor		0.00	I	Employ	er Data	
	First Name Robert	MI Last N J. Mitche	ame or PAC/Party Committee Name	Suffix	Employer N Info Reques			
Street Ad		J. WHICH			Street Addr			
15 Congre					Street			
City			State Zip		City		State	Zip
Narragans	sett		RI 02882					
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. D. J. J. J. D. J. J. J. D. J. J. J. D. J. J. J. D. J. J. D. J. J. D. J. J. J. J. D. J.		04/06/2021			500.00
			In Kind/Other Receipts D	escription				
		Contributor 1	Information			Employ	er Data	

State

RI

Zip

02921

Suffix

Employer Name

Street Address

3377 Post Road

City

Warwick

Mediflor Organics, Inc.

State

RI

Zip

02886

ΜI

Moceri

J.

Prefix First Name

Street Address

176 Boylston Dr

City

Cranston

Nicholas

Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date Contribution Amount 04/14/2021 250.00
		In Kind/Other Receipts De	scription
Duefer	First Name	Contributor Information MI Last Name or PAC/Party Committee Name	Employer Data Suffix Employer Name
Tienx	Stephen	M. Montaquila	West Bay Eye Associates
Street A	-	•	Street Address
28 Pever	il Rd		222 Jefferson Blvd.
City		State Zip	City State Zip
Cranston	ı	RI 02921	Warwick RI 02888
Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date Contribution Amount 04/29/2021 500.00
	CHECK	In Kind/Other Receipts De	
			-
		Contributor Information	Employer Data
	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name
Dr.	Emilio	James Monti	Jr. Retired
Street A	ddress mas Leighton Blvd		Street Address 108 Thomas Leighton Blvd
City	mas Leigmon Bivd	State Zip	City State Zip
Cumberl	and	RI 02864	Cumberland RI 02864
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date Contribution Amount
2112	Check	Individual	04/06/2021 150.00
		In Kind/Other Receipts De	scription
Prefix	First Name	Contributor Information	Employer Data Suffix Employer Name
Frenx	Stella	MI Last Name or PAC/Party Committee Name CatheriMoran	Suffix Employer Name Kent Regency
Street A	ddress		Street Address
	Robin Rd, Unit 902		660 Commonwealth Ave
City		State Zip	City State Zip
Lincoln		RI 02865	Warwick RI 02886
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date Contribution Amount
	Credit/Debit Card	Individual	06/16/2021 25.00
		In Kind/Other Receipts De	scription
		Contributor Information	Employer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name
	Clifford	Morin	Helping Hands Community Partners
Street A	ddress		Street Address
	erman Ave		364 River Avenue
City		State Zip	City State Zip
East Pro		RI 02911	Providence RI 02908
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date Contribution Amount
	Check	Individual In Kind/Other Receipts De	06/18/2021 250.00
		ii Kinwother Receipts De	scription
		Contributor Information	Employer Data

Prefix First Name

Street Address

44 Cray St

Cumberland

City

David

MI

M.

Morin

Last Name or PAC/Party Committee Name

State

RI

Zip

02864

Suffix

Employer Name

Street Address

44 Cray St

Cumberland

City

Fore Court Racquet Club

State

RI

Zip

Item	Transaction Type		Contribution Type		Receipt Date 06/23/2021	Deposit Date	Co	ntribution An	
	Check		Individual In Kind/Other Receipts De		06/23/2021			30	00.00
		Con	tributor Information			Employ	er Data		
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
C	Scott	A	Morrison		Brave Famil				
	Address Commons				Street Addr 3913 Main S				
City	Commons		State Zip		City	succi	State	Zip	
•	compton		RI 02837		Tiverton		RI	Zip	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution An	nount
	Credit/Debit Card		Individual		06/16/2021	•		1,00	00.00
			In Kind/Other Receipts De	scription					
			tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
Stt	Thomas Address	V	Moses		Street Addr	nso, Jackvony, Ltd			
	stminister St, Ste 400					nister St, Ste 400			
City	similater 51, 510 100		State Zip		City	and start st	State	Zip	
Provide	ence		RI 02903		Providence		RI	02903	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution An	nount
	Credit/Debit Card		Individual		06/24/2021			2	25.00
			In Kind/Other Receipts De	scription					
	71		tributor Information	~ ~~		Employ	er Data		
Prefix	First Name Tom	MI	Last Name or PAC/Party Committee Name Mulligan	Suffix	Employer N Wolf and Co				
Street	Address		Mungan		Street Addr				
	apum Trail North				255 State St				
City	•		State Zip		City		State	Zip	
Wakefi	eld		RI 02879		Boston		MA	02109	
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution An	nount
	Check		Individual		04/29/2021			5(00.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employ	er Data		

		Con	tributor Information		Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Joseph	E.	Murphy		Hudson Company			
Street A	Address				Street Address			
11 Moc	kingbird Dr				139 Ethan Allen Highway			
City			State Zip		City	State	Zip	
Exeter			RI 02822		Ridgefield	CT	06877	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	C	ontribution Amount	
	Check		Individual		04/19/2021		250.00	

In Kind/Other Receipts Description

		Cont	tributor Information		Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Com	ımittee Name Suff	x Employer	Employer Name			
	Michael F. Murphy			Lamar Ad	Lamar Advertising Co.				
Street A	ddress				Street Ad	dress			
PO Box	41081				360 Warre	en Ave			
City			State	Zip	City	State	Zip		
Provide	nce		RI	02940	East Provi	idence RI	02914		

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount
	CIRCE		In Kind/Other Receipts De		00/21/2021			200.00
			•	•				
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Stacey	L.	Murphy		Homemaker			
Street A	Address kefield St				Street Addr 390 Wakefie			
220	kenela St		St-1- 7'-			ia st	64-4-	7:-
City West W	armick		State Zip RI 02893		City West Warwie	-1 _r	State RI	Zip 02893
Item	Transaction Type		Contribution Type		06/23/2021	Deposit Date	Co	ntribution Amount 500.00
	Check		Individual In Kind/Other Receipts De		00/23/2021			300.00
			In Kind Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Carolyn	M.	Murray		F/S Capitol	Consulting, LLC		
Street A	Address				Street Addr	ess		
39 New	ell Dr				One West Ex	change St		
City			State Zip		City		State	Zip
Cumber	land		RI 02864		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021			268.89
			In Kind/Other Receipts De	scription				
							-	
DC.	First Name		tributor Information	C-CC-	FN	Employ	er Data	
Prefix	William	MI S	Last Name or PAC/Party Committee Name Murray	Suffix	Employer N Retired	ame		
Street A		5	Mulay		Street Addr	055		
191 Sta					191 Staples			
City	, , , , , , , , , , , , , , , , , , ,		State Zip		City		State	Zip
Cumber	-land		RI 02864		Cumberland		RI	02864
Item	Transaction Type		Contribution Type	D	eceipt Date	Deposit Date	Co	ntribution Amount
Item	Check		Individual		06/21/2021	Deposit Date	Cu	1.000.00
			In Kind/Other Receipts De					-,
			•	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Michael	T	Napolitano		Law Office	of Michael T. Napoli	itano	
Street A	Address				Street Addr	ess		
96 Cres	t Dr				1554 Cransto	on St		
City			State Zip		City		State	Zip
Cransto	n		RI 02921-3312		Cranston		RI	02910
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_						
		Con	tributor Information			Employ	er Data	

Prefix First Name

Street Address

84 Coventry Dr

City

Coventry

Ernest

MI

Nardolillo

J.

Last Name or PAC/Party Committee Name

State

RI

Zip

02816

Suffix

Employer Name

Street Address

City

Coventry

Olde Theater Diner

33 Sandy Bottom Rd

State

RI

Zip

Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 06/07/2021	Contribution Amount 500.00
		In Kind/Other Receipts De	scription	
				- .
D C	E'4 N	Contributor Information		oyer Data
	First Name Donald	MI Last Name or PAC/Party Committee Name R. Nokes	Suffix Employer Name Netcenergy LLC	
Street Ad		R. HORES	Street Address	
41 Elm S			1125 Pontiac Ave	
City	•	State Zip	City	State Zip
Rehoboth		MA 02769	Cranston	RI 02920
			I	Contribution Amount
Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 04/02/2021	500.00
	CHECK	In Kind/Other Receipts De		500.00
		in this other receipts be	scription	
		Contributor Information	Emplo	oyer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	
	George	A. Nolan	Bayside Growers, LLC	
Street Ad	ldress		Street Address	
804 Cente	erville Rd		PO Box 6883	
City		State Zip	City	State Zip
Warwick		RI 02887	Warwick	RI 02887
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	05/31/2021	750.00
		In Kind/Other Receipts De	scription	
		Contributor Information		oyer Data
	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	
	Freddy	Nunez	Nunez Liquors	
Street Ad 251 Alaba			Street Address 575 Broad St	
	illia Ave	State Zip	City	St-4- 7:
City Providence	*P	RI 02905	Providence	State Zip RI 02907
			l .	
Item	Transaction Type Credit/Debit Card	Contribution Type Individual	Receipt Date Deposit Date 06/05/2021	Contribution Amount 500.00
	Cledit/Debit Card	In Kind/Other Receipts De		500.00
		III Kilid/Other Receipts De	scription	
		Contributor Information	Emple	oyer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	-,
	Amy	Nunn	RI Public Health Institute	
Street Ad			Street Address	
20 Clarke	Rd		383 W Fountain St	
City		State Zip	City	State Zip
Barringto	n	RI 02806	Providence	RI 02903
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Credit/Debit Card	Individual	06/21/2021	200.00
		In Kind/Other Receipts De	scription	
		Contributor Information		oyer Data
	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	
	Tames	Nyhera	Leading Age RI	

Leading Age RI

Street Address

East Providence

City

400 Massasoit Avenue

State

RI

Zip

02914

James

Street Address

24 Andersen Ct

City

Westerly

Nyberg

State

RI

Zip

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Re	eceipts Description				
							_	
D 6 1	D 37		butor Information	N	I	Employe	r Data	
	First Name Francis		Last Name or PAC/Party Committe O'Brien	ee Name Suffix	Employer N	ame operty Casualty Insur	A	-intinu
_		C.	O Brien				ance Assoc	ciation
Street Ad 411 Canto					Street Addr			
	n Ave		St. 4 77:		1	ave	64.4	7.
City Milton			State Zip MA 0218		City Milton		State MA	Zip 02186
MIIIOII								
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021			250.00
			In Kind/Other Re	eceipts Description				
		C	Loston To Commenting			т 1	- D-4	
D . C .	F: N		butor Information	N 0 00	F 1 31	Employe	r Data	
	First Name Thomas		Last Name or PAC/Party Committe O'Connor	ee Name Suffix	Employer N Retired	ame		
		J. '	Осонног		Street Addr			
Street Ad PO Box 7					PO Box 775			
	730		S4-4- 7:			o .	64-4-	7:-
City Cumberla	n.d		State Zip RI 0286		City Cumberland		State RI	Zip 02864
					<u>I</u>			
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/14/2021			1,000.00
			In Kind/Other Re	eceipts Description				
							D /	
D 6 1	D* 4 34		butor Information	NT 0 00	- · ·	Employe	r Data	
	First Name Carol		Last Name or PAC/Party Committe O'Donnell	ee Name Suffix	Employer N CRM Modul			
		A.	O Donnen		Street Addr			
Street Ad	uress nel John Gardner Rd				120 Lavan S			
City	ier John Gardner Ru		State Zip		1	,,	State	Zip
Narragans	ett			82-1538	City Warwick		RI	02888-1050
					l			
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Money Order		Individual		06/08/2021			1,000.00
			In Kind/Other Re	eceipts Description				
		Contri	butor Information			Familian	Data	
Prefix 1	First Name		Dutor Information Last Name or PAC/Party Committee	e Name Suffix	Employer N	Employe	r Data	
	Scott		Datley	ervame Sumx	910 Auto Sal			
Street Ad		· ·	oducy		Street Addr			
218 Kenye					910 Quaker			
City			State Zip		City		State	Zip
Wakefield	ı		RI 0287		East Greenw	rich	RI	02818
	Transaction Type				eceipt Date	Deposit Date		
Item	Credit/Debit Card		Contribution Type Individual		eceipt Date 06/09/2021	Deposit Date	Co	ntribution Amount 500.00
	Create Debit Cald			eceipts Description	00/07/2021			300.00
			III KIIIW/Other Re	ccepts Description				
		Contri	butor Information			Employe	r Data	
Profix 1	First Name		Dutor Information Last Name or PAC/Party Committee	e Name Suffix	Employer N		Data	
TICHY I	and Manie	1411	Last rame of TAC/Tarty Committee	Chame SumX	50 State	ante		

50 State

City

Street Address

1401 H St, NW

Washington

Zip

20005

State

DC

Colm

Street Address

1401 H St, NW

Washington

City

Ocomartun

State

DC

Zip

Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 100.00
			In Kind/Other Receipts De	scription				
			ibutor Information			Employe	r Data	
	First Name	MI W	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Lynne	w	OHalloran		Info. Reques			
Street Add	dress on Pond Road				Street Addre	ess		
	on Pond Road		84.4. 77-		C't-		64-4-	7:-
City Waltham			State Zip MA 02453		City		State	Zip
							-	
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. P. J. P. J. J. P. J. J. P. J. P. J. J. P. J. P. J. P. J. P. J. P. J. P. J. J. P. J. J. P. J. J. P. P. J. P		06/12/2021			200.00
			In Kind/Other Receipts De	scription				
		C1	:L.,4 T., f.,			F1	D	
Prefix I	First Name		ibutor Information Last Name or PAC/Party Committee Name	Suffix	Fmul N	Employe	r Data	
	oseph	MI C.	Olivelli	Jr.	Employer N	ame eal Estate Group		
Street Add	-	C.	Onveni	J1.	Street Addre	-		
24 Marine					355 Broadwa			
City	, Di		State Zip		City	ay .	State	Zip
Narragans	ett		RI 02882		Providence		RI	02901
					<u> </u>	D '(D (
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt Date 06/15/2021	Deposit Date	Co	ntribution Amount 25.00
	Ciculi Deoit Card		In Kind/Other Receipts De		00/15/2021			25.00
			III Kiliu/Other Receipts De	scription				
		Contr	ibutor Information			Employe	r Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Dutu	
	Wilson		Organization	~ 		Organization, LLC		
Street Add	dress		ž		Street Addre	_		
244 Weyb					244 Weyboss			
City			State Zip		City		State	Zip
Providence	e		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
Ticin.	Check		Individual		04/01/2021	Deposit Date	Cu	1,000.00
			In Kind/Other Receipts De					-,
				- Pilon				
		Contr	ibutor Information			Employe	r Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Т	Theodore		Orson		Orson & Bru			
Street Add	dress				Street Addre	ess		
1 Gaslight	t Ln				144 Wayland	l Ave		
City			State Zip		City		State	Zip
North East	ton		MA 02356		Providence		RI	02906
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
			•	-				
		Contr	ibutor Information			Employe	r Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
			De dede	т	A1- D- d			

Jr.

Angelo Padula & Son

State

RI

Zip

02893

Street Address

West Warwick

2 Canna St

Angelo

Street Address

West Warwick

City

554 Wakefield St

A.

Padula

State

RI

Zip

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/10/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		Com	tributor Information			Emplo	wan Data	
Profix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		yer Data	
Tienx	Jeffrey	WII	Padwa	Sum	Padwa Law			
Street A	ddress				Street Addr	ess		
25 Marg	rave Ave				One Park Ro	ow		
City			State Zip		City		State	Zip
Provider	ice		RI 02906		Providence		RI	02903
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
	Check		In Kind/Other Receipts De		00/21/2021			200.00
				1				
		Con	tributor Information				yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	John	R.	Pagliarini		Graphene Co	•		
Street A					Street Addr			
	iberland Rd		O		225 Dyer St		C	7 .
City Warwick			State Zip RI 02886		City Providence		State RI	Zip 02903
					<u> </u>			
Item	Transaction Type Check		Contribution Type Individual		04/20/2021	Deposit Date	Co	ntribution Amount 1,000.00
	CHECK		In Kind/Other Receipts De		04/20/2021			1,000.00
			in inno other receips be	ser puon				
		Con	tributor Information			Emplo	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Raul		Palacios		Capital Good	d Fund		
Street A					Street Addr	ress		
	77th Terrace				22 A Street			
City Miami			State Zip FL 33143-4631		City Providence		State RI	Zip 02907
					<u> </u>			
Item	Transaction Type Check		Contribution Type Individual		06/23/2021	Deposit Date	Co	ntribution Amount 250 00
	CHeck		In Kind/Other Receipts De		00/23/2021			250.00
			II Kind Other Ketcipis De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Anthony	J	Paliotta		Retired			
Street A	ddress				Street Addr	ress		
PO Box	4				PO Box 4			
City			State Zip		City		State	Zip
West Wa			RI 02893		West Warwi		RI	02893
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/09/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				

Employer Data

Zip

02903

State

RI

Contributor Information

Paolino

Last Name or PAC/Party Committee Name

State

RI

Zip

02901

Suffix

Jr.

Employer Name

Paolino Properties

100 Westminster St

Street Address

City

Providence

MI

R.

Prefix First Name

Street Address

PO Box 1576

Providence

City

Joseph

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		•				F 1	D 4	
Prefix Fi	inst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N		er Data	
	homas	L.	Papa	Sumx		Consulting, LLC		
Street Add	lress		•		Street Addr	-		
25 Holly La	ane				1 West Exch	ange St, #3		
City			State Zip		City		State	Zip
Cumberlan	ıd		RI 02864		Providence		RI	02903
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
			In Kind/Other Receipts De					
			•	-				
		Con	tributor Information			Employ	er Data	
Prefix Fi		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	'hristopher	P.	Parisi		Trailblaze M	_		
Street Add	iress nge St, Unit 706				Street Addr	ress nister St, #200		
City	nge st, Omt 700		State Zip		City	insici 5i, #200	State	Zip
Providence	•		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021	•		200.00
			In Kind/Other Receipts De	scription				
							_	
Prefix Fi	Sund Name		tributor Information	Suffix	Employer N		er Data	
	eter	MI S.	Last Name or PAC/Party Committee Name Parisi	Sumx	Innovex	vame		
Street Add	lress				Street Addr	ess		
3 Whitney					11 Powder I	Hill Rd		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/07/2021			100.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix Fi	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		ei Data	
	ohn		Partridge		1	now & Hahn		
Street Add	lress				Street Addr	ess		
46 Ames St	t				180 S. Main	St		
City			State Zip		City		State	Zip
Pawtucket			RI 02861		Providence		RI	02903
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/16/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
		-	The same of the sa			Linpidy		

State

RI

Zip

02864

Peacock

Suffix

Employer Name

Street Address

Cumberland

24 Stream View Dr

State

RI

Zip

02864

Retired

City

Prefix First Name

Street Address

Cumberland

City

24 Stream View Dr

Paula

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/29/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
			tributor Information	S 000	I	Employ	er Data	
Prefix	First Name Paul	MI	Last Name or PAC/Party Committee Name Pedini	Suffix	Employer N	ame A Civil Northeast, In	c	
Street A			reum		Street Addre		С.	
	nelsea Lane				1365 Main S			
City			State Zip		City		State	Zip
Lincoln			MA 01773		Waltham		MA	02451
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/17/2021	-		1,000.00
			In Kind/Other Receipts De	scription				
			tributor Information		T	Employ	er Data	
Prefix	First Name Carrie	MI W.	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame harter School Associ	- 4 :	
Street A		W.	Penner		Street Addre		ation	
	hestnut St, Suite 200				3000 Sand H			
City	iesinu 5t, 5une 200		State Zip		City	ili Ku	State	Zip
Menlo l	Park		CA 94025		Menlo Park		CA	94025
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/17/2021	Deposit Date		1,000.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
64 4	Greg		Penner		Madrone Cap			
Street A	hestnut St. Ste 200				Street Addre	ill Rd, Ste 1-150		
City	icolaid St, Ste 200		State Zip		City	111, 510 1 150	State	Zip
Menlo l	Park		CA 94025		Menlo Park		CA	94025-7160
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/09/2021			1,000.00
			In Kind/Other Receipts De	scription				
			tributor Information		T	Employ	er Data	
Prefix	First Name Patrick	MI L.	Last Name or PAC/Party Committee Name	Suffix	Employer N The Okonite			
Street A		L.	Penny		Street Addre			
	Route 416				102 Hilltop F			
City	route 410		State Zip		City	· ·	State	Zip
Campbe	ell Hall		NY 10916		Ramsey		NJ	07446
Item	Transaction Type		Contribution Type	10	eceipt Date	Deposit Date		ntribution Amount
rtem			Individual		06/12/2021	Depusit Date	Cu	750.00
	Check				00/12/2021			150.00

In Kind/Other Receipts Description

Zip

02920

Suffix

Employer Name

Street Address

980 Reservoir Ave

RE/MAX

City

Cranston

Employer Data

Zip

02910

State

RI

Contributor Information

Perelman

Last Name or PAC/Party Committee Name

State

RI

Prefix First Name

Street Address

City

Cranston

Richard

200 Hoffman Ave, Apt 401

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/04/2021	Deposit Date	Co	ntribution Amount 250.00
			In Kind/Other Receipts De	scription				
		C	tributor Information			F	D-4-	
Profix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Tienx	Richard	WII	Perelman	Sum	RE/MAX	vame		
Street A	Address				Street Addr	ess		
200 Ho	ffman Ave, Apt 401				980 Reservo	oir Ave		
City			State Zip		City		State	Zip
Cransto	n		RI 02920		Cranston		RI	02910
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Robert	A.	Peretti		Law Office	of Robert A. Peretti		
	Address				Street Addr	ess		
45 Bice	ntennial Way				1140 Reserv	oir Ave		
City			State Zip		City		State	Zip
North P	rovidence		RI 02911		Cranston		RI	02920
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. P. J. P. J. J. P. J. J. P. J. J. P. P. J. P. J. P. J. P. J. P.		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Michael	J.	Perik		_	cation Student Resour	ce Center	
	Address				Street Addr			
10 High	ı St		C		101 Dyer St	, Ste 3A	G	7.
City Jamesto	NIM.		State Zip RI 02835		City Providence		State RI	Zip 02903
					<u> </u>	D 11D 1		
Item	Transaction Type Check		Contribution Type Individual		06/23/2021	Deposit Date	Ca	ntribution Amount 1.000.00
	CHCCK		In Kind/Other Receipts De					1,000.00
				- P				
		Con	tributor Information			Employe	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Susan	T	Perkins			of Susan Perkins		
	Address				Street Addr			
_	ring Street		S4-4- 7:		462 Broadw	ay	C4-4-	7:
City Newpro	nt .		State Zip RI 02840		City Providence		State RI	Zip 02909
				•	-	Daniel D.		
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/14/2021	Deposit Date	Ca	ntribution Amount 250.00
			In Kind/Other Receipts De	scription				

Employer Data

Zip

02910

State

RI

Contributor Information

Perlmutter

Last Name or PAC/Party Committee Name

State

RI

Zip

02910

Suffix

Employer Name

Street Address

949 Park Ave

City

Cranston

Law Office of Seth A. Perlmutter

Prefix First Name

Street Address

949 Park Ave

City

Cranston

Seth

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/17/2021	Deposit Date	Co	ntribution Amo
	Circui		In Kind/Other Receipts De		00/1//2021			300.
			-	_				
			tributor Information		,	Employe	er Data	
	First Name Steven	MI J.	Last Name or PAC/Party Committee Name Peterson	Suffix	Employer N Steven J. Pet			
Street Ad		J.	Peterson		Street Addr			
17 Cross I					1536 Westm			
City			State Zip		City		State	Zip
Johnston			RI 02919		Providence		RI	02909
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amo
	Check		Individual		05/12/2021			500.
			In Kind/Other Receipts De	scription				
		~					.	
Prefix I	First Name		tributor Information	Suffix	Employer N	Employe	er Data	
	Gerald	MI	Last Name or PAC/Party Committee Name Petros	Sumx		llen & Snyder LLP		
Street Ad			1000		Street Addr			
35 Walms						Plaza, Ste 1500		
City			State Zip		City		State	Zip
Saunderst	own		RI 02874-3620		Providence		RI	02903
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 05/19/2021	Deposit Date	Co	utribution Amo
	Check		In Kind/Other Receipts De		03/19/2021			1,000
			In Mind other Receipts De	scription				
		Con	tributor Information			Employe	er Data	
Prefix 1	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Lynn	A.	Pietrantozzi		Auto Service	-		
Street Ad					Street Addr			
70 Plain R	Ca		S4-4- 7:		165 Frenchte	own Kd	C4-4-	7:
City North Kin	gstown		State Zip RI 02852		City North Kings	town	State RI	Zip 02852
Item	Transaction Type		Contribution Type	p	eceipt Date	Deposit Date		ntribution Amo
Item	Check		Individual		06/08/2021	Deposit Date	Cu	250.
			In Kind/Other Receipts De	scription				
			-	-				
		Con	tributor Information			Employe	er Data	
		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	First Name					-tti C		
2	Zachary		Pilcher		Cannon Con	•		
Street Ad	Zachary dress		Pilcher		Street Addr	ress		
Street Ad 72 Spragu	Zachary dress				Street Addr 265 Wicken	ress	State	7 in
Street Ad	Zachary dress		Pilcher State Zip RI 02915		Street Addr	ress	State RI	Zip 02903
Street Ad 72 Spragu City Riverside	Zachary dress ue Ave		State Zip RI 02915	Q	Street Addr 265 Wickens City Providence	ess den St	RI	02903
Street Ad 72 Spragu City	Zachary dress		State Zip		Street Addr 265 Wickens City	ress	RI	
Street Ad 72 Spragu City Riverside	Zachary dress ie Ave Transaction Type		State Zip RI 02915 Contribution Type		Street Addr 265 Wickens City Providence	ess den St	RI	02903
Street Ad 72 Spragu City Riverside	Zachary dress ie Ave Transaction Type		State Zip RI 02915 Contribution Type Individual		Street Addr 265 Wickens City Providence	ess den St	RI	02903

State

RI

Zip 02920

Suffix

Employer Name

Street Address

City

Pawtucket

114 Smithfield Ave

RA Cataldo & Associates, Inc.

State

RI

Zip

02860

ΜI

Pilkington

Prefix First Name

Street Address

33 Begonia Dr

City

Cranston

John

Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 04/29/2021	Deposit Date	Ca	ntribution Amount 500.00
			In Kind/Other Receipts De					500.00
			•	•				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Robert	K.	Pine	Jr.		Civil Northeast, Inc.		
	Address				Street Addre			
	brook Rd				1365 Main St			
City			State Zip MA 01527		City		State	Zip
Millbur					Waltham		MA	02451
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			500.00
			In Kind/Other Receipts De	scription				
		C-	4.:			F1	D-4-	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer Na	Employer	Data	
гтепх	Joshua	J	Poitras	Sumx	CFGS LLC	ime		
Street A		•	Tolidas		Street Addre	66		
	onel Brown Rd				39 Colonel B			
City			State Zip		City		State	Zip
Griswol	d		CT 06351		Griswold		CT	06351
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
110111	Check		Individual		06/09/2021	Deposit Date	Cu	500.00
			In Kind/Other Receipts De	scription				
			•	•				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ıme		
	Donna	M.	Policastro		The Policastr	o Group		
Street A					Street Addre			
293 Wh	itford Ave				273 Wickford	Ave		
City			State Zip		City		State	Zip
Provide	nce		RI 02908		Providence		RI	02908
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/17/2021			1,000.00
			In Kind/Other Receipts De	scription				
		•					D /	
DC	E:4 N		tributor Information	CCC	F N-	Employer	Data	
Prefix	First Name Joseph	MI M.	Last Name or PAC/Party Committee Name Polisena	Suffix	Employer Na Town of John			
Street A	•	IVI.	ronscha		Street Addre			
	Shore Drive				1385 Hartford			
City			State Zip		City		State	Zip
Johnston	n		RI 02919		Johnston		RI	02919
Item	Transaction Type		Contribution Type	ъ	Receipt Date	Deposit Date		ntribution Amount
nem	Check		Individual		06/21/2021	ъерози ване	Co	200.00
			In Kind/Other Receipts De					200.00
				Pilon				
		Con	tributor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
			D 4		l =			

State

RI

Zip 02857

A.

Polseno

Street Address

North Scituate

City

767 Hartford Pike

Linda

Street Address

North Scituate

767 Hartford Pike

State

RI

Zip

02857

Retired

City

Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Pessints De		04/20/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	George	G.	Powers		Driscoll Ager	ncy		
Street A	Address				Street Addre	ess		
197 8th	St, Unit 522				141 Longwat	er Drive		
City			State Zip		City		State	Zip
Charles	town		MA 02129		Norwell		MA	02061
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/21/2021			150.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Joseph	P.	Pratt		Boys & Girls	Club of Newport		
	Address				Street Addre			
2 Rose	St				95 Church St			
City			State Zip		City		State	Zip
Newpor	rt		RI 02840		Newport		RI	02840
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/17/2021			1,000.00
			In Kind/Other Receipts De	scription				
		_						
D 6	TO 4 3 T		tributor Information	0.00	I	Employe	r Data	
Prefix	First Name Scott	MI P.	Last Name or PAC/Party Committee Name Rabideau	Suffix	Employer Na	ame urce Services, Inc.		
S44 /		r.	Navideau			_		
880 Hil	Address 1 Rd				Street Addre			
City	i Ku		State Zip		City	Lane	State	Zip
Pascoag	,		RI 02859		Harrisville		RI	02830
						D '(D)		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
	Cledit/Debit Cald		In Kind/Other Receipts De		00/21/2021			200.00
			iii Kiiiu/Otilei Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Bob		Rae		Frontline Fitr			
Street A	Address				Street Addre	ess		
87 Broo	kridge Dr				380 Jefferson	Blvd.		
City			State Zip		City		State	Zip
Exeter			RI 02822		Warwick		RI	02886
Item	Transaction Type		Contribution Type Individual		Receipt Date 04/29/2021	Deposit Date	Co	ntribution Amount
	Check		In Kind/Other Receipts De		V-1/27/2021			500.00
			In Kind Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		. Data	
2 I CHA	a a st rame	.,11	Zast Name of 1210/1 arty Committee Name	Jama	Zimpioyei 10			

State

RI

Zip 02865

D.

Raftery

Western Oil Inc.

Street Address

1 Duchess Way

State

RI

Zip

02865

City

Lincoln

Street Address

City

Lincoln

11 Lampercock Ln

Jared

Item	Transaction Type Check		Contribution Type Individual		eceipt Date Deposit Date 06/21/2021	Contribution Amount 250.00
	CHECK		In Kind/Other Receipts De		00/21/2021	250.00
			In thing other receipts be	scription		
		Con	tributor Information		Employ	ver Data
Prefix First		MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Leon	idas		Raptakis		Venus Pizza	
Street Addres					Street Address	
2080 Noosene	ck Hıll Rd				2080 Nooseneck Hill Rd	
City			State Zip RI 02816		City	State Zip RI 02816
Coventry					Coventry	
Item	Transaction Type		Contribution Type		eceipt Date Deposit Date	Contribution Amount
	Check		Individual		06/21/2021	1,000.00
			In Kind/Other Receipts De	scription		
		Con	tributor Information		Employ	ver Data
Prefix First	Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	er Data
Perry			Raso		Matunuck Oyster Bar	
Street Addres	s				Street Address	
PO Box 188					629 Succotash Rd	
City			State Zip		City	State Zip
Peacedale			RI 02883		South Kingstown	RI 02879
Item	Transaction Type Check		Contribution Type Individual		deceipt Date Deposit Date 05/28/2021	Contribution Amount 300.00
			In Kind/Other Receipts De	scription		
		Con	tributor Information		Employ	er Data
	Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Mars			Raucci	Jr	Prime, Buchholz & Associates	
Street Addres					Street Address	
100 Fountain S	Street, Unit 4B		a		273 Corporate Drive, Suite 250	a
City Providence			State Zip RI 02903		City Portsmouth	State Zip RI 03801
Item	Transaction Type		Contribution Type		eceipt Date Deposit Date	Contribution Amount
	Check		Individual		05/05/2021	250.00
			In Kind/Other Receipts De	scription		
					Employ	.
		Con	tributor Information			er Data
Prefix First	Name	Con	tributor Information Last Name or PAC/Party Committee Name	Suffix		er Data
Prefix First			tributor Information Last Name or PAC/Party Committee Name Ray	Suffix	Employer Name IDS Highway Safety, Inc.	er Data
	en	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	er Data
Krist	en s	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name IDS Highway Safety, Inc.	rer Data
Krist Street Addres	en s	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name IDS Highway Safety, Inc. Street Address	State Zip
Krist Street Addres 110 Staples Ro	en s	MI	Last Name or PAC/Party Committee Name Ray	Suffix	Employer Name IDS Highway Safety, Inc. Street Address 1230 Mendon Rd	

In Kind/Other Receipts Description

Zip

02864-2900

06/15/2021

Employer Name

Street Address

Cumberland

City

1 James McKee Way

Suffix

200.00

Employer Data

State

RI

Zip

02864-5342

Boys and Girls Club of Northern Rhode Island

Individual

Last Name or PAC/Party Committee Name

State

RI

Contributor Information

Rebelo

J.

Credit/Debit Card

Prefix First Name

Gary Street Address

3310 Diamond Hill Rd

City

Cumberland

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		Receipt Date 06/25/2021	Deposit Date	Co	ntribution Amount
			In Kind/Other Receipts De	scription				
			•	•				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
_	Michael		Rego		Full Circle, I			
	Address				Street Addr			
	lham St, #3		State Zip		486 Dry Brid	ige Ka	64-4-	Zip
City Newpor	πt		State Zip RI 02840		City North Kings	town	State RI	02852
Item	Transaction Type		Contribution Type	R	leceipt Date	Deposit Date	Co	ntribution Amount
Item	Check		Individual		04/29/2021	Deposit Date	Cu	500.00
			In Kind/Other Receipts De					
			•	•				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Michael	Μ.	Reilly		Brox Industr			
	Address				Street Addr			
	rbrook Rd		0		181 Mill St S	S,	C	77
City Salem			State Zip NH 03079		City Marlborough		State MA	Zip 01752
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt D ate 06/14/2021	Deposit Date	Co	ntribution Amount 1,000.00
	Cicuit Deoit Card		In Kind/Other Receipts De		00/14/2021			1,000.00
			in time other receipts be	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Gary		Reis		MedTech Inc	2		
	Address				Street Addr			
	mistice Blvd				290 Armistic	e Blvd.		
City			State Zip		City		State	Zip
Pawtuc	ket		RI 02861		Pawtucket		RI	02861
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	yer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		,	
	Mary Beth		Reis		MedTech, In			
Street A	Address				Street Addr	ess		
86 Naus	shon Rd				290 Armistic	e Blvd.		
City			State Zip		City		State	Zip
Pawtuc	ket		RI 02861		Pawtucket		RI	02861
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			1,000.00
			In Kind/Other Receipts De	scription				

Employer Data

Zip

02886

State

RI

Contributor Information

Resnick

Last Name or PAC/Party Committee Name

State

RI

Zip

02886

Suffix

Employer Name Resnick & Caffrey

Street Address

City

Warwick

300 Centerville Rd

ΜI

J.

Prefix First Name

Street Address

259 Love Lane

City

Warwick

Sanford

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/01/2021	Deposit Date	Co	ntribution Amount 250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Fundana	u Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Ticha	Christopher	P.	Rhodes	Suma	Harrington &			
Street A	ddress				Street Addr	ess		
70 Webs	ter Ave				2750 S Cour	nty Trail		
City			State Zip		City		State	Zip
Narragar	nsett		RI 02882		East Greenw	vich	RI	02818
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 05/29/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De					555.55
			•	•				
		Con	tributor Information			Employe	r Data	
Prefix	First Name Janet	MI	Last Name or PAC/Party Committee Name Ricci	Suffix	Employer N Retired	Vame		
Street A	ddress				Street Addr	ress		
2700 Do	nald Ross Road, Apt. 307				2700 Donald	Ross Road, Apt. 307	,	
City			State Zip		City		State	Zip
Palm Be	ach Gardens		FL 33410		Palm Beach	Gardens	FL	33410
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 04/15/2021	Deposit Date	Co	ntribution Amount
	Check		In Kind/Other Receipts De		04/15/2021			1,000.00
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Susan	P.	Richardson		Tails of New	-		
Street A	ddress y Craig Rd				Street Addr 216 Gray Cr			
City	Claig Ku		State Zip		City	alg Ku	State	Zip
Middleto	own		RI 02842		Middletown		RI	02842
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
Item	Check		Individual		05/19/2021	Deposit Date	Cu	250.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employe	r Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street A	Larry	D.	Riggs		Pare Corpora			
	uuress tone Valley Place					ess e Valley Place		
City	ione vancy race		State Zip		City	valley I lace	State	Zip
Lincoln			RI 02865		Lincoln		RI	02865
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/06/2021			1,000.00
			In Kind/Other Receipts De	scription				
		•	tributor Information			Employe	D (

MI

Ritchotte

J.

Prefix First Name

Street Address

246 Hardig Rd

City

Warwick

Henry

Last Name or PAC/Party Committee Name

State

RI

Zip

02886

Suffix

Employer Name

Hank's Herbs

City

Exeter

Street Address

315B Noosebeck Hill Rd

Zip

02882

State

RI

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/14/2021	Deposit Date	Con	ntribution Amount 500.00
			In Kind/Other Ro	eceipts Description				
			butor Information	37 00		Employer	Data	
	First Name Joelle		Last Name or PAC/Party Committe Rocha	ee Name Suffix	Employer N		DC.	
		C. I	Kocha			, Rocha & Parmenter, l	PC	
Street Ad 34 Castle					Street Addre 128 Dorranc			
	ion Di		St. 1. 7.			e 31, #300	64-4-	7:-
City Cranston			State Zip RI 029		City Providence		State RI	Zip 02903
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/14/2021			1,000.00
			In Kind/Other Ro	eceipts Description				
						. .	D /	
D 6	EV . 37		butor Information	3.T C CC	F 1 N	Employer	Data	
	First Name Kyle		Last Name or PAC/Party Committe Rocha	ee Name Suffix	Employer N Ken Rocha (
Street Ad	•	А. І	Kocha		Street Addr			
200 Midv					555 Cranston			
City	vay Ku		State Zip		City	131	State	Zip
Cranston			RI 029		Providence		RI	02907
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Cor	ntribution Amount
	Credit/Debit Card		Individual		06/30/2021			100.00
			In Kind/Other Ro	eceipts Description				
		Contril	butor Information			Employer	Data	
Prefix	First Name		Last Name or PAC/Party Committe	ee Name Suffix	Employer N		Data	
	John		Rodrigues	ee Name Sum	Net Cables F			
Street Ad		-			Street Addr			
	field Road				PO Box 781:			
City			State Zip		City		State	Zip
Cumberla	nd		RI 028		Cumberland		RI	02864
Item	Transaction Type		Contribution True	D	asint Data	Demosit Data	Con	ntribution Amount
Hein	Check		Contribution Type Individual		eceipt Date 06/23/2021	Deposit Date	Cui	300.00
	CHCCK			eceipts Description	70/23/2021			300.00
			In Kind Other Re	eccipis Description				
		Contri	butor Information			Employer	Data	
Prefix	First Name		Last Name or PAC/Party Committe	ee Name Suffix	Employer N			
	Mark		Romano		Figliola & R			
Street Ad	dress				Street Addr			
	ington Road				282 County			
City			State Zip	1	City		State	Zip
Barringto	n		RI 028		Barrington		RI	02806
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/14/2021	p	201	1,000.00
			In Kind/Other R	eceipts Description				
		Contri	butor Information			Employer	Data	
Prefix	First Name		Last Name or PAC/Party Committe	ee Name Suffix	Employer N			
	Anthony		Posaiti			truction Co. IIC		

Rosciti Construction Co., LLC

Zip

02919

State

RI

Street Address

City

Johnston

139 King Philip St

Anthony

Street Address

PO Box 19120

City

Johnston

Rosciti

State

RI

Zip

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/08/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	u Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Trena	Angelo	S.	Rotella	Suma		ace Nursing Home		
Street A	_				Street Addr	ess		
48 Limer	rock Rd				455 Douglas	s Ave		
City			State Zip		City		State	Zip
Smithfie	ld		RI 02917		Providence		RI	02908
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De					
			•	-				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	CJ		Rotella		VCtapro.com			
Street A					Street Addr 187 Love La			
City	e Ln		State Zip		City	ine	State	Zip
Warwick			RI 02886		Warwick		RI	02886
Item	Transaction Type		Contribution Type	D	eceipt Date	Deposit Date		ntribution Amount
Item	Check		Individual		06/22/2021	Deposit Date	Cu	250.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
C44 A	Michael	G.	Royster		Clean Strike	-		
Street A					Street Addr 1193 Main S			
City	m ot		State Zip		City		State	Zip
West Wa	rwick		RI 02893		West Warwi	ck	RI	02893
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/16/2021			900.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employe	r Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street A	James	L.	Rubenstein		Street Addr	verage Group		
	ns Point Rd				45 Commerc			
City	is i one ico		State Zip		City	ce way	State	Zip
Marion			MA 02738		Norton		MA	02766
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cn	ntribution Amount
	Check		Individual		06/15/2021			900.00
			In Kind/Other Receipts De	scription				
		_	tributor Information			Employe	T	

ΜI

R.

Rubenstein

Prefix First Name

Street Address

Chestnut Hill

City

91 Middlesex Rd

Samuel

Last Name or PAC/Party Committee Name

State

MA

Zip

02467

Suffix

Employer Name

Street Address

City

Norton

45 Commerce Way

Horizon Beverage Group

Zip

02766

State

MA

Item	Transaction Type Check		Contribution Type Individual		Receipt D ate 06/17/2021	Deposit Date	Co	ntribution Amount 200.00
	CHCK		In Kind/Other Receipts De		00/17/2021			200.00
			•	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Daniel	J.	Rubiano		Rubiano & C			
	Address				Street Addre			
	Vood Circle				7 Austin Ave,	Ste 1		
City	311-		State Zip RI 02828		City		State	Zip 02828
Greenv					Greenville		RI	
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			200.00
			In Kind/Other Receipts De	scription				
		•				Е 1	D 4	
D C	Einst Name		tributor Information	CCC	FIN	Employ	er Data	
Prefix	First Name Alan	MI H.	Last Name or PAC/Party Committee Name Rudolph	Suffix	Employer Na State of Rhod			
Street	Address	11.	Kudoipii		Street Addre			
	e Hill Terrace				82 Smith St	33		
City	c IIII Iciiucc		State Zip		City		State	Zip
Cransto	n		RI 02921		Providence		RI	02903
Item	Transaction Type		Contribution Type	D	leceipt Date	Deposit Date	Co	ntribution Amount
пеш	Check		Individual		06/12/2021	Deposit Date	Cu	1,000.00
			In Kind/Other Receipts De					-,
		Con	tributor Information			Employ	er Data	
Prefix	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame		
	Dominick	J.	Ruggerio		Retired			
Street A	Address				Street Addre	ss		
42 Cou	ntryside Dr				42 Countrysic	de Dr		
City			State Zip		City		State	Zip
North P	rovidence		RI 02904		North Provide	ence	RI	02904
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			300.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
~	Angelo		Ruo		Colbea Enter	-		
	Address				Street Addre			
17 Heri	tage Dr		S4-4- 7:-		2050 Plainfie	іа Ріке	64-4-	7:
City Lincoln			State Zip RI 02865		City Cranston		State RI	Zip 02921
				_	l			
Item	Transaction Type		Contribution Type Individual		deceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount
	Check				00/21/2021			200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		er Data	
TICHA	I II St I VAILLE	.,11	Last Name of TAOT arty Committee Name	Jama	Limpioyei Na			

State

RI

Zip 02919

Russo

Jr.

Street Address

City

Johnston

1405 Plainfield St

Alfred Russo Attorney at Law

State

RI

Zip

02919

Street Address

7 Alvina St

City

Johnston

Alfred

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 06/12/2021	Deposit Date	Co	ntribution Amount 300.00
			In Kind/Other Receipts De	scription				
D 6 F			tributor Information	C 60"	I	Employ	er Data	
	First Name Scott	MI S.	Last Name or PAC/Party Committee Name Ruzzo	Suffix	Employer N Miracle Law			
Street Add		Э.	Kuzzo		Street Addr	•		
	onsville Ave				271 Simmor			
City	ons vinc 11ve		State Zip		City		State	Zip
Johnston			RI 02919		Johnston		RI	02919
Item	Transaction Type		Contribution Type	R	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021	•		200.00
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N Twin Rivers			
_	Daniel		Ryan					
Street Add					Street Addr 100- Twin R			
City	SOII AVE		State Zip		City	ivei Ku	State	Zip
Pawtucket			RI 02861		Lincoln		RI	02865
					<u> </u>	D'4 D-4-		
Item	Transaction Type Check		Contribution Type Individual		04/08/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
			-	•				
		Con	tributor Information			Employ	er Data	
	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	David	M.	Ryan		Health Conc	-		
Street Add					Street Addr			
101 Melro	se Ave		o		359 Broad S	t	6	
City Jamestown			State Zip RI 02835-1006		City Providence		State RI	Zip 02907
					<u> </u>	D ::D:		
Item	Transaction Type Check		Contribution Type Individual		04/06/2021	Deposit Date	Co	ntribution Amount 1.000.00
	Clieck		In Kind/Other Receipts De					1,000.00
			In Kind Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix F	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
K	Kevin	S.	Ryan		Health Conc	epts, Ltd		
Street Add	dress				Street Addr	ress		
124 Varnus	m Ave				359 Broad S	t		
City			State Zip		City		State	Zip
Pawtucket			RI 02860-4617		Providence		RI	02907
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual P. J. J. P.		05/26/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
		Cull	u ioutoi Illioi illation			Employ	CI Data	

State

RI

Zip 02806

Ryan

Suffix

Employer Name

Street Address

State

RI

Zip

02806

PO Box 242

Barrington

Retired

City

Prefix First Name

Street Address

PO Box 242

Barrington

City

Thomas

Item	Transaction Type		Contribution Type Individual		06/08/2021	Deposit Date	Co	ntribution Amount 500.00
	Check		In Kind/Other Receipts De		00/08/2021			300.00
			in Kind Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Michael	T.	Saccoccia		M. Saccoccia	a's Construction & L	andscaping	LLC
Street A					Street Addre			
405 Tiog	ue Ave				405 Tiogue A	Ave		
City Coventry			State Zip RI 02816-7117		City Coventry		State RI	Zip 02816-7117
						D 11D 1		
Item	Transaction Type Check		Contribution Type Individual		04/12/2021	Deposit Date	Ca	ntribution Amount 250.00
	CHECK		In Kind/Other Receipts De		04/12/2021			230.00
			<u> </u>	ser-puon				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Michael	A .	Saccucci		Rhode Island	l Eye Institute		
Street A					Street Addr			
	urtis Corner Rd		O		150 E. Mann	ung St	G	
City Wakefiel	a.		State Zip RI 02879		City Providence		State RI	Zip 02906
					l .	D 11D 1		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		06/16/2021	Deposit Date	Co	ntribution Amount 7.00
	Credit/Debit Card		In Kind/Other Receipts De		00/10/2021			7.00
			in time other receipts be	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		_
	Christine		Sahagian		Retired			
Street A					Street Addr			
	erview Road		St. t. 7:-		1629 Riverv	iew Koad	64-4-	7:-
City Deerfield	l Beach		State Zip FL 33441		City Deerfield Be	ach	State FL	Zip 33441
	Transaction Type		Contribution Type	ъ	<u> </u>			ntribution Amount
Item	Check		Individual		06/23/2021	Deposit Date	Co	200.00
	CHCCK		In Kind/Other Receipts De		00/23/2021			200.00
			•	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Christine		Sahagian		Retired			
Street A					Street Addr			
	erview Road		0		1629 Rivervi	iew Koad	G	7.
City Deerfield	l Reach		State Zip FL 33441		City Deerfield Be	ach	State FL	Zip 33441
Item	Transaction Type		Contribution Type Individual		06/09/2021	Deposit Date	Co	ntribution Amount 500.00
	Check		marviauai		00/03/2021			300.00

Employer Data

Zip

02882

State

RI

Contributor Information

Sahagian

Last Name or PAC/Party Committee Name

State

RI

Zip

02882

Suffix

Employer Name

Bonnet Liquors

Street Address

Narragansett

City

965 Boston Neck Road

ΜI

J.

Prefix First Name

Street Address

Narragansett

City

101 Montauk Road

Paul

τ.	an e an				·	D 11D 1		
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/30/2021	Deposit Date	Co	ntribution Amoun 500.00
	CHECK		In Kind/Other Receipts De		04/30/2021			300.00
			III Killo/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame		
_	George	P.	Sakellaris		Amaresco			
	Address				Street Addre			
	ndolph Ave				111 Speen St			
City			State Zip		City		State	Zip
Milton			MA 02186-4033		Framingham		MA	01701
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 05/12/2021	Deposit Date	Co	ntribution Amoun 500.00
	CHECK		In Kind/Other Receipts De		03/12/2021			300.00
			<u> </u>	seripiion.				
		Con	tributor Information			Employ	er Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	James	K.	Salome		Vanco Industr	ries		
	Address				Street Addre	ess		
12 Wyn	ndcliff Drive				1005 Douglas	s Pike		
City			State Zip		City		State	Zip
Saunder	rstown		RI		Smithfield		RI	02917
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/08/2021	Deposit Date	Co	ntribution Amoun 1,000.00
			In Kind/Other Receipts De	scription				-
		Con	tributor Information			Employ	er Data	
Prefix	First Name	\mathbf{MI}	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame		
	T 4:		G					
_	Julia		Santilli		Info Requeste			
	Address		Santilli	~ 				
10 Sydr					Info Requeste Street Addre			
10 Sydr City	Address ney Lane		State Zip		Info Requeste		State	Zip
10 Sydr	Address ney Lane			-	Info Requeste Street Addre		State	Zip
10 Sydr City	Address ney Lane		State Zip		Info Requeste Street Addre			Zip ntribution Amoun
10 Sydr City Narraga	Address ney Lane ansett		State Zip RI 02882 Contribution Type Individual	R	Info Requeste Street Addre City	ess		_
10 Sydr City Narraga	Address ney Lane ansett Transaction Type		State Zip RI 02882 Contribution Type	R	Info Requeste Street Addre City	ess		ntribution Amoun
10 Sydr City Narraga	Address ney Lane ansett Transaction Type	Con	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts De	R	Info Requeste Street Addre City	Deposit Date	Co	ntribution Amoun
10 Sydr City Narraga Item	Address ney Lane ansett Transaction Type Check		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts De tributor Information	Rescription	Info Requeste Street Addre City eceipt Date 06/08/2021	Deposit Date Employ	Co	ntribution Amoun
10 Sydr City Narraga Item	Address ney Lane ansett Transaction Type Check First Name	Con MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	R	Info Requeste Street Addre City eccipt Date 06/08/2021 Employer Na	Deposit Date Employ	Co	ntribution Amoun
10 Sydr City Narraga Item	Address ney Lane ansett Transaction Type Check First Name Rachael		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts De tributor Information	Rescription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste	Deposit Date Employ ame	Co	ntribution Amoun
10 Sydr City Narraga Item	Address ney Lane ansett Transaction Type Check First Name		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	Rescription	Info Requeste Street Addre City eccipt Date 06/08/2021 Employer Na	Deposit Date Employ ame	Co	ntribution Amoun
10 Sydr City Narraga Item	Address ney Lane ansett Transaction Type Check First Name Rachael		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	Rescription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste	Deposit Date Employ ame	Co	ntribution Amoun
10 Sydr City Narraga Item Prefix Street A	Address ney Lane Transaction Type Check First Name Rachael Address		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip	R escription Suffix	Info Requeste Street Addre City eccipt Date 06/08/2021 Employer Na Info Requeste Street Addre City	Deposit Date Employ ame ed	er Data State	ntribution Amoun 1,000.00
10 Sydr City Narraga Item Prefix Street A	Address ney Lane Transaction Type Check First Name Rachael Address Transaction Type		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type	R scription Suffix R	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City eceipt Date	Deposit Date Employ ame	er Data State	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A	Address ney Lane Transaction Type Check First Name Rachael Address		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual	R escription Suffix R	Info Requeste Street Addre City eccipt Date 06/08/2021 Employer Na Info Requeste Street Addre City	Deposit Date Employ ame ed	er Data State	ntribution Amoun 1,000.00
10 Sydr City Narraga Item Prefix Street A	Address ney Lane Transaction Type Check First Name Rachael Address Transaction Type		State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type	R escription Suffix R	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City eceipt Date	Deposit Date Employ ame ed	er Data State	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A	Address ney Lane ansett Transaction Type Check First Name Rachael Address Transaction Type Check	MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual In Kind/Other Receipts Detributor Information	R Suffix R escription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City city eceipt Date 06/11/2021	Deposit Date Employ ame ed ess	Conter Data State Co.	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A	Address ney Lane ansett Transaction Type Check First Name Rachael Address Transaction Type Check	MI Con MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	R escription Suffix R	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City eceipt Date 06/11/2021	Deposit Date Employ name ed ed ess	Conter Data State Co.	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A City Item	Address ney Lane ansett Transaction Type Check First Name Rachael Address Transaction Type Check	MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual In Kind/Other Receipts Detributor Information	R Suffix R escription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City city eceipt Date 06/11/2021	Deposit Date Employ name ed ed ess	Conter Data State Co.	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A City Item	Address ney Lane Transaction Type Check First Name Rachael Address Transaction Type Check First Name Address	MI Con MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	R Suffix R escription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City eceipt Date 06/11/2021 Employer Na Hairworks Pl Street Addre	Deposit Date Employ ame ed Employ ame us sss	Conter Data State Co.	ntribution Amoun 1,000.00 Zip ntribution Amoun
10 Sydr City Narraga Item Prefix Street A City Item	Address ney Lane Transaction Type Check First Name Rachael Address Transaction Type Check First Name Address	MI Con MI	State Zip RI 02882 Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name Santilli State Zip Contribution Type Individual In Kind/Other Receipts Detributor Information Last Name or PAC/Party Committee Name	R Suffix R escription	Info Requeste Street Addre City eceipt Date 06/08/2021 Employer Na Info Requeste Street Addre City eceipt Date 06/11/2021 Employer Na Hairworks Pl	Deposit Date Employ ame ed Employ ame us sss	Conter Data State Co.	ntribution Amoun 1,000.00 Zip ntribution Amoun

Zip 02864

State

RI

City

Cumberland

Zip 02864

State

RI

City Cumberland

Item	Transaction Type Credit/Debit Card		Contribution Type Individual	F	Receipt Date 06/29/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	escription	ı			
		-	4.7.4T.F			F	D-4-	
Duefer	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Henx	Jonathan	N.	Savage	Sumx		Partners, LLP		
Street A	Address				Street Addr			
564 Sou	ıth Water Street				564 Water St	treet		
City			State Zip		City		State	Zip
Provide	nce		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		05/19/2021			250.00
			In Kind/Other Receipts De	escription				
		Con	tributor Information			Employe	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Timothy	R.	Scanlon		Construction	Industries of Rhode I	slasnd	
Street A	Address				Street Addr	ress		
52 Bon	net View				615 Jefferson	n Blvd.		
City			State Zip		City		State	Zip
Jamesto	own		RI 02835		Warwick		RI	02886
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			250.00
			In Kind/Other Receipts De	escription				
		Con	tributor Information			Employe	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Gregory	J.	Schadone		Law Office of	of Gregory H. Schador	ie	
	Address				Street Addr			
4 Kriste	n Dr				7 Waterman	Ave		
City Smithfi	-1.4		State Zip RI 02828		City North Provide	dana a	State RI	Zip 02911
					1			
Item	Transaction Type Check		Contribution Type	ŀ	Receipt D ate 04/06/2021	Deposit Date	Co	ntribution Amount
	Cneck		Individual In Kind/Other Receipts De	escription				1,000.00
			iii kiilwotiici keetipis De	scription				
		Con	tributor Information			Employe	Data Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			_
	Scott	R.	Scofield		Canna Pharn	-		
	Address				Street Addr			
14 Mor	se Ave		S4-4- 7:-		38 Salem Dr	ī	C4-4-	7:
City Attlebox	ro		State Zip MA 02703		City North Provide	lence	State RI	Zip 02904
Item	Transaction Type		Contribution Type	т	Receipt Date	Deposit Date		ntribution Amount
rtein	Check		Individual		04/20/2021	Dehosu Date		1,000.00
			In Kind/Other Receipts De	escription				

Employer Data

Zip

01748

State

MA

Contributor Information

Scola

Last Name or PAC/Party Committee Name

State

RI

Zip

02891

Suffix

Employer Name

EMC Corporation

Street Address

City

Hopkinton

176 South Street

ΜI

M

Prefix First Name

Jill

189 Watch Hill Road

Street Address

City

Westerly

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/20/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
D C	E' AN		ributor Information	C . CC	I E I N	Employ	er Data	
Prenx	First Name Nicole	MI G.	Last Name or PAC/Party Committee Name Scola	Suffix	Employer N Shields Heal			
Street A		G.	Scola		Street Addre			
	auress ah Hill Rd					ogy Center Drive		
City	ai i i i i i i i i i i i i i i i i i i		State Zip		City	ogy center brive	State	Zip
Westerly			RI 02891-5031		Stoughton		MA	02072
				D		Damasit Data		
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 04/06/2021	Deposit Date	Co	ntribution Amount 100.00
	CHECK		In Kind/Other Receipts De		04/00/2021			100.00
			in kind other receips De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Maria		Seale		Kent Regenc	ey		
Street A	ddress				Street Addre	ess		
111 Leig	h Rd				660 Common	nwealth Ave		
City			State Zip		City		State	Zip
Cumberl	and		RI 02864-4009		Warwick		RI	02886
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/09/2021			1,000.00
			In Kind/Other Receipts De	scription				
			ributor Information		T =	Employ	er Data	
Prefix	First Name Bruce	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N The Okonite			
64 4 4		K.	Sellers					
Street A 10 Hudse					Street Addre			
	on sueet		S4-4- 7:-		102 Hilltop I	Xu	64-4-	7:
City Warwick			State Zip NY 10990		City Ramsey		State NJ	Zip 07446
	•					D 11D 1		
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/13/2021			1,000.00
			III Kiliu/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Michael	J.	Sepe			e & Company		
Street A	ddress				Street Addre			
23 Pine l	Ridge Dr				14 Garfield A	Ave		
City			State Zip		City		State	Zip
Cranston	ı		RI 02921		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			500.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Christopher	G	Shahan		NeoGames			

NeoGames

City

Street Address

4 Grundy's Way

Cumberland

State

RI

Zip

02864

Christopher

Street Address

4 Grundy's Way

Cumberland

City

G

Shaban

State

RI

Zip

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		deceipt D ate 06/16/2021	Deposit Date	Co	ntribution Amount 7.00
			In Kind/Other Receipts De	scription				
		C	4			F	D-4-	
Profix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Tienx	Stanley	.,,11	Sheer	Sum	Abott Prope			
Street A	ddress				Street Addr			
271 Shar	mrock Dr				380 Jefferso	n Blvd STE B		
City			State Zip		City		State	Zip
Warwick			RI 02886		Warwick		RI	02886
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 04/02/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De					
			-	•				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
64 4 4	Merrill		Sherman			onsulting, LLC		
Street A					50 South Ma			
City	из		State Zip		City	am 51, #500	State	Zip
Jamestov	vn		RI 02835		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/22/2021			1,000.00
			In Kind/Other Receipts De	scription				
							D /	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Tienx	Linda	M.	Silva	Sum	Retired	vame		
Street A	ddress				Street Addr	ess		
50 David	l St				50 David St			
City			State Zip		City		State	Zip
Cumberl	and		RI 02864		Cumberland	l	RI	02864
Item	Transaction Type		Contribution Type		leceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual P. J. J. P.		06/23/2021			500.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	МІ	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Robert	M	Silva		Silva, Thom	as, Martland & Offe	nberg	
Street A	ddress				Street Addr	ess		
8 Circle	Dr				1100 Aquida	neck Ave		
City			State Zip		City		State	Zip
Middleto			RI 02842		Middletown		RI	02842
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		06/07/2021			250.00
			in Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	

ΜI

A.

Silva

Prefix First Name

Street Address

Cumberland

City

9 Sneech Pond Rd

Ross

Last Name or PAC/Party Committee Name

State

RI

Zip

02864

Suffix

Employer Name

Street Address

City

Smithfield

1005 Douglas Pike

Navigant Credit Union

Zip

02917

State

RI

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/08/2021	Deposit Date	Co	ntribution Amount 500.00
			In Kind/Other Receipts De	scription				
		C				F	D-4-	
Prefix Firs	st Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N		er Data	
Lori			Silveira	Suma		k & Sheehan		
Street Addre	ess				Street Addr	ess		
1 Apple Valle	ey Dr				One Citizens	s Plaza, 8th Fl		
City			State Zip		City		State	Zip
Rehoboth			MA 02769		Providence		RI	02903
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/09/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix Firs	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		Cr Data	
Ama		M.	Simon		Homemaker			
Street Addre	ess				Street Addr	ess		
126 Cathedra	l Ave				126 Cathedr	al Ave		
City			State Zip		City		State	Zip
Providence			RI 02908-1908		Providence		RI	02908-1908
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/09/2021	Deposit Date	Co	ntribution Amount
	CHECK		In Kind/Other Receipts De		00/03/2021			1,000.00
				-				
		Cont	ributor Information			Employ	er Data	
	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	hony		Simon			ulting Services		
Street Addre					Street Addr			
126 Cathedra	l Ave		C		126 Cathedr	al Ave	6	
City Providence			State Zip RI 02908		City Providence		State RI	Zip 02908
						D 11D 1		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/07/2021	Deposit Date	Co	ntribution Amount 1.000.00
	Credit Beoff Card		In Kind/Other Receipts De		00/07/2021			1,000.00
			<u> </u>	p				
		Cont	ributor Information			Employ	er Data	
	st Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
Nina			Simon		Not Listed			
Street Addre					Street Addr			
85 Gold Mine	e Rd		a		85 Gold Mir	ie Rd	a. .	
City Chepachet			State Zip RI 02814		City Chepachet		State RI	Zip 02814
	an e an					D 11D 1		
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/21/2021	Deposit Date	Co	ntribution Amount 200.00
	CHCK		In Kind/Other Receipts De		00/21/2021			200.00
			in line out i recepts be	Prior				
		Cont	ributor Information			Employ	er Data	
					T			

MI

Skenyon

Last Name or PAC/Party Committee Name

State

RI

Zip 02874

Suffix

Employer Name

Street Address

96 Riverdell Dr

Saunderstown

State

RI

Zip

02874

Retired

City

Prefix First Name

Street Address

96 Riverdell Dr

Saunderstown

City

Leo

Item	Transaction Type Check		Contribution Type Individual		Receipt Date Deposit Date 06/12/2021	Con	ntribution Amount 500.00
			In Kind/Other Receipts De				
		_				_	
D C	E' A N		tributor Information	C . CC		oyer Data	
Prenx	First Name Edward	MI M.	Last Name or PAC/Party Committee Name Skwirz	Suffix	Employer Name Retired		
Street A	Address	141.	SAWIZ		Street Address		
	eland Dr				32 Ridgeland Dr		
City			State Zip		City	State	Zip
Cumber	rland		RI 02864		Cumberland	RI	02864
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Cor	ntribution Amoun
	Check		Individual		06/22/2021		1,000.00
			In Kind/Other Receipts De	scription			
			tributor Information			oyer Data	
Prefix	First Name David	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
D44 A		M	Slye		Shine Associates Street Address		
	Address thland Avenue, Unit 1				699 Boylston Street		
City	mand Avenue, Omi 1		State Zip		City	State	Zip
•	m Heights		MA 02494		Boston	MA	02116
Item	Transaction Type		Contribution Type	D	Receipt Date Deposit Date		ntribution Amount
цеш	Check		Individual		06/21/2021	Cu	1,000.00
			In Kind/Other Receipts De				-,
			•	•			
		Con	tributor Information		Empl	oyer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jill	Α	Slye		A Sounding Board LLC		
	Address				Street Address		
_	thland Avenue, Unit 1		a		797 Highland Avenue, Unit 1	.	
City Naadba	m Heights		State Zip MA 02494		City Needham Heights	State MA	Zip 02494
					_		
Item	Transaction Type		Contribution Type		Receipt Date Deposit Date 06/17/2021	Co	ntribution Amount 250.00
	Check		Individual In Kind/Other Receipts De		00/17/2021		230.00
			III Killa Other Receipts De	scription			
		Con	tributor Information		Empl	oyer Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	•	
Prefix	_	E	Smith		SM Group		
Prefix	Gregory				Street Address		
	Gregory Address				Street Address		
Street A					17 High Ridge Drive		
Street A	Address		State Zip		17 High Ridge Drive City	State	Zip
Street A	Address 1 Ridge Drive		State Zip RI 02864		17 High Ridge Drive	State RI	Zip 02864
Street A 17 High City	Address 1 Ridge Drive		-		17 High Ridge Drive City	RI	

In Kind/Other Receipts Description

Zip

02864

05/06/2021

Employer Name

Street Address

Cumberland

17 High Ridge Drive

SM Group

City

Suffix

200.00

Employer Data

State

RI

Zip

02864

Individual

Last Name or PAC/Party Committee Name

State

RI

Contributor Information

Smith

ΜI

E

Check

Prefix First Name

17 High Ridge Drive

Street Address

Cumberland

City

Gregory

Item	Transaction Type Credit/Debit Card		Contribution Type Individual			eceipt D ate 06/20/2021	Deposit Date	Ca	ntribution Amou 5.0
			In Kind/Othe	r Receipts De	scription				
			butor Information				Employe	r Data	
Prefix F	irst Name Ionica		Last Name or PAC/Party Comn Smith	nittee Name	Suffix	Employer N RICARES	ame		
		,	Smith						
Street Add	tress dar Creek Lane					Street Addr 134 Mathew			
City	dai Creek Lane		State	Zip		City	son St	State	Zip
Estacada				97023		Providence		RI	02903
	Turner stirm True				D		Damasit Data		
Item	Transaction Type Check		Contribution Type Individual			eceipt D ate 05/04/2021	Deposit Date	Co	ntribution Amou 1,000.0
	CHECK		In Kind/Othe	r Receints De		03/04/2021			1,000.0
			III Kiliu/Otlic	r Receipts De	scription				
		Contri	butor Information				Employe	r Data	
Prefix F	irst Name		Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N			
	arbara		Smith White				ublic Schools		
Street Add	lress					Street Addr	ess		
27 Raven C	Circle					90 Pleasant	View Ave		
City			State	Zip		City		State	Zip
Cranston			RI	02921		Smithfield		RI	02917
Item	Transaction Type		Contribution Type		R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual		(06/17/2021			250.0
			In Kind/Othe	r Receipts De	scription				
		Contri	butor Information				Employe	r Data	
Prefix F			Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N			
	ristin	;	Solomon			Homemaker			
Street Add						Street Addr			
18 Rosewo	od Dr		C			18 Rosewoo	d Dr	C	
City Lincoln				Zip 02865		City Lincoln		State RI	Zip 02865
Item	Transaction Type		Contribution Type			eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual	D D.		06/17/2021			500.0
			In Kind/Othe	r Keceipts De	scription				
		Contri	butor Information				Employe	r Data	
Prefix F	irst Name		Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N		1 Data	
	rian		Spero		Sama	Beacon Mut			
Street Add						Street Addr			
30 Greysto						1 Beacon Ce	enter, Warwick, RI 028	886	
City			State	Zip		City	-	State	Zip
Portsmouth	1			02871		Warwick		RI	02871
Item	Transaction Type		Contribution Type		R	eceipt Date	Deposit Date	Co	ntribution Amou
	Check		Individual			06/17/2021			200.0
			In Kind/Othe	r Receipts De	scription				
				-	_				
		Contri	butor Information				Employe	r Data	
Prefix F		MI	Last Name or PAC/Party Comm	nittee Name	Suffix	Employer N			
T/			_			D-11 M	mi alaa		

Dallas Mavericks

State

TX

Zip

75226

Street Address

The Pavilion

City

Dallasl

Kevin

Street Address

470 Sylvan Ct

Saunderstown

City

Stacom

State

RI

Zip

Item	Transaction Type Check	Contribution Type Individual	Receipt Date Deposit Date 06/08/2021	Contribution Amount 500.00
		In Kind/Other Receipts	Description	
				.
D. C	E' AN	Contributor Information		yer Data
	First Name Charles	MI Last Name or PAC/Party Committee Name E. Standish	Suffix Employer Name Standish Health & Air	
Street Ac		D. Standish	Street Address	
	Farm Rd		120 Hill Farm Rd	
City		State Zip	City	State Zip
Coventry		RI 02816	Coventry	RI 02816
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	06/08/2021	500.00
		In Kind/Other Receipts	Description	
		Contributor Information		yer Data
	First Name	MI Last Name or PAC/Party Committee Name		
	Donald	Standish	Standish Health & Air	
Street Ac 68 Hill F			Street Address	
City	aim Ku	State Zip	City	State Zip
Coventry		RI 02816	Coventry	RI 02816
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
Item	Check	Individual	06/21/2021	200.00
		In Kind/Other Receipts		
			-	
		Contributor Information	Emplo	yer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name	Suffix Employer Name	
	George	W. Stansfield	III RE/MAX Town & Country	
Street A			Street Address	
32 Hillsio	le Rd		2081 Diamond Hill Rd	
City		State Zip	City	State Zip
Cumberla		RI 02864	Cumberland	RI 02864
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	04/15/2021	1,000.00
		In Kind/Other Receipts	Description	
		Contributor Information	Emplo	yer Data
Prefix	First Name	MI Last Name or PAC/Party Committee Name		,
Dr.	Julianne	Stapleton	Dr. Julianne Stapleton, Acupund	cturist
Street A	ldress		Street Address	
70 Slocus	n Rđ		126 W. Main Rd	
City		State Zip	City	State Zip
Portsmou	th	RI 02871-3525	Middletown	RI 02842
Item	Transaction Type	Contribution Type	Receipt Date Deposit Date	Contribution Amount
	Check	Individual	04/12/2021	500.00
		In Kind/Other Receipts	Description	
D 6	First Name	Contributor Information MI Last Name or PAC/Party Committee Name		yer Data

Zip

02813-0177

State

RI

Stasiunas Companies

Zip

02813-2549

State

RI

Street Address

Charlestown

City

3880 Old Post Rd

Timothy

Street Address

PO Box 177

Charlestown

City

Stasiunas

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 06/20/2021	Deposit Date	Co	ntribution Amount 25.00
			In Kind/Other Receipts De					
			ibutor Information	~ ~	l	Employer	Data	
Prefix	First Name Julia		Last Name or PAC/Party Committee Name Steiny	Suffix	Employer N Not Employe			
Street A			Siemy		Street Addr			
38 Fores					38 Forest St	ess		
City			State Zip		City		State	Zip
Provider	ce		RI 02906		Providence		RI	02906
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/01/2021			250.00
			In Kind/Other Receipts De	escription				
							.	
Prefix	First Name		ibutor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employer	Data	
гтепх	Sean Sean		Stevenson	Sumx	Genesis Hea			
Street A					Street Addr			
49 Essex					25 Ridgewoo			
City			State Zip		City		State	Zip
Bedford			NH 03110		Bedford		NH	03110
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/08/2021			1,000.00
			In Kind/Other Receipts De	escription				
		Contr	ibutor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Mark		Stone		Providence I	Brewing Company		
Street A					Street Addr			
	hington Street, Unit 306				10 Sims Ave	Unit 110		
City			State Zip		City		State	Zip 02909
Provider			RI 02903		Providence		RI	
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 04/20/2021	Deposit Date	Co	ntribution Amount 1.000.00
	Cneck		In Kind/Other Receipts De		04/20/2021			1,000.00
			III Kiliu/Otilei Receipts De	escription				
		Contr	ibutor Information			Employer	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Holli		Stott		Kelly, Souza	, Rocha & Parmenter		
Street A					Street Addr			
	rance Street # 300					e Street # 300		
City Provider	ce		State Zip RI 02903		City Providence		State RI	Zip 02903
				_		B 455		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/19/2021	Deposit Date	Co	ntribution Amount 100.00
	Cical/Deon Cald		In Kind/Other Receipts De		00/17/2021			100.00
				TIVIT TO A PARTY OF				
			•	•				

State

MA

Zip

02771

Stoukides

Suffix

Employer Name

Street Address

825 Chalkstone Ave

State

RI

Zip

02908

Chartercare

Providence

City

Prefix First Name

Street Address

515 Pine St

City

Seekonk

John

Item	Transaction Type		Contribution Type Individual		eceipt D ate 06/07/2021	Deposit Date	Co	ntribution Amount 500.00
	Check		In Kind/Other Receipts De		06/07/2021			300.00
			Ili Kilid/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Raymond		Studley		RI Public Tra			
Street A 3 Pine C					Street Addre 705 Elmwoo			
City	one Dr		State Zip		City	d Ave	State	Zip
Barringt	on		RI 02806		Providence		State RI	02907-3314
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		06/26/2021	•		100.00
			In Kind/Other Receipts De	scription				
			2 / 76 /			F 1	D (
Prefix	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	Johnny		Suarez		Suarez Desig			
Street A	ddress				Street Addre	ess		
147 Rog	er Williams Ave				983 Cranstor	ı St		
City			State Zip		City		State	Zip
Rumford	i		RI 02916		Cranston		RI	02920
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amount
	Check		Individual		06/09/2021			250.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Brian	W.	Sullivan		Town of Line	coln Police		
Street A	ddress				Street Addre	ess		
1201 Lo	nsdale Ave				100 Old Rive	er Rd		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Lincoln		RI	02802
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		05/05/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employ	er Data	
		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
Prefix	First Name				DRC Emerge	ency Services		
Prefix	First Name John		Sullivan					
Prefix Street A	John		Sullivan		Street Addre	ess		
Street A	John .ddress							
Street A PO Box City	John ddress 17017		State Zip		Street Addre P.O. Box 170 City		State	Zip
Street A	John ddress 17017				Street Addre P.O. Box 170		State TX	Zip 77552
Street A PO Box City	John ddress 17017		State Zip		Street Addre P.O. Box 170 City		TX	

Employer Data

Zip

02908

State

RI

Contributor Information

Swann

A.

Prefix First Name

Street Address

58 Tiffany Rd

City

Coventry

David

Last Name or PAC/Party Committee Name

State

RI

Zip

02816-4417

Suffix

Employer Name

Street Address

City

Providence

Rhode Island College

600 Mt. Pleasant Ave

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/05/2021	Deposit Date	Con	ntribution Amount 1,000.00	
			In Kind/Other Receipts De	scription					
		•	tributor Information			F 1	D (
Prefix F	inst Name	Employer Data Suffix Employer Name							
	ohn	MI L.	Last Name or PAC/Party Committee Name Sweeney	Sumx	Retired	ame			
Street Add	lress				Street Addr	ess			
83 Malbon	ne Rd				83 Malbone	Rd			
City			State Zip		City		State	Zip	
Newport			RI 02840		Newport		RI	02840	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount	
	Check Individual				06/17/2021		1,000.00		
			In Kind/Other Receipts De	scription					
						F 1	D /		
Prefix F	ïrst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data		
	lobert	F.	Tasca	Jr.		notive Group			
Street Add					Street Addr	-			
26 Hi View					1300 Pontiac				
City			State Zip		City		State	Zip	
Hope			RI 02831		Cranston		RI	02920	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount	
	Check		Individual		06/11/2021			200.00	
			In Kind/Other Receipts De	scription					
						ъ.	D (
Prefix F	ïrst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data		
	ohn	J.	Tassoni	Jr.	Sentinel Me				
Street Address					Street Addr	ess			
543 Putnam Pike					600 Putnam	Pike, Ste 10B			
City			State Zip		City		State	Zip	
Greenville			RI 02828		Smithfield		RI	02828	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount	
	Check		Individual		06/21/2021			200.00	
			In Kind/Other Receipts De	scription					
		C	to it not an Information			F	D. 4-		
Prefix F	irst Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data		
	ann	G.	Teixeira	Juna	State of Rho				
Street Address					Street Addr	ess			
1 Georgian	na Dr				82 Smith St				
			State Zip		City		State	Zip	
City	.1		RI 02864		Providence		RI	02903	
City Cumberlan	10								
-	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount	
Cumberlan			Individual		eceipt Date 06/21/2021	Deposit Date	Co	utribution Amount 200.00	
Cumberlan	Transaction Type					Deposit Date	Co		
Cumberlan	Transaction Type	Carri	Individual			Deposit Date Employ			

State

RI

Zip 02864

Suffix

Employer Name

Info Requested

Street Address

State Zip

City

ΜI

A.

Teixeira

Prefix First Name

Street Address

Cumberland

City

One Georgiana Dr

Armand

Item	Transaction Type		Contribution Type	I	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual	•	06/14/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Michael		Tennant		The Okonite			
Street Address					Street Addr	ess		
32 Ridgefield Road					102 Hilltop I	Rd		
City			State Zip		City		State	Zip
Warwic	k		NY 10990		Ramsey		NJ	07446
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021	_		200.00
			In Kind/Other Receipts De	scription	ı			
			ributor Information			Employ	er Data	
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Joseph		Terino	Jr.	Tercat Tool &			
Street A					Street Addr			
15 Justin	n Road				31 Delaine S	it		
City			State Zip		City		State	Zip
East Gre	eewich		RI 02818		Providence		RI	02909
Item	Transaction Type		Contribution Type	F	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/11/2021			250.00
			In Kind/Other Receipts De	scription				
		C	Lilandara Tafarra di sa			Fl	D-4-	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
Tienx	Joshua	MII	Teverow	Sumx	Joshua Tever			
Street A					Street Addr	•		
55 Pine					55 Pine St	CSS		
City			State Zip		City		State	Zip
Provide	nce		RI 02903		Providence		RI	02903
Item	Transaction Type		Contribution Type	ī	Receipt Date	Deposit Date	Co	ntribution Amount
Tiem.	Check		Individual	•	06/08/2021	Deposit Date	Cu	1,000.00
			In Kind/Other Receipts De	scription				-,
			•	•				
		Con	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Robin		Thacker		Info. Reques	ted		
Street A	Address				Street Addr	ess		
Info. Re	quested							
City			State Zip		City		State	Zip
Item	Transaction Type		Contribution Type	I	Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			500.00
			In Kind/Other Receipts De	scription				
			ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Alfred	G	Thibodeau		Alfred Thibo	odeau, Esq.		

Zip 02864

State

RI

Street Address

Cumberland

City

246 Abbott Run Valley Road

Zip 02864

State

RI

Street Address

Cumberland

City

246 Abbott Run Valley Rd

Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 06/18/2021	Deposit Date	Co	ntribution Amoun 500.00
			In Kind/Other Receipts De	scription				
							D .	
Prefix First	Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	r Data	
Brian		R	Thibodeau	Sumx	Bay Busines			
Street Address	s				Street Addr			
33 Metcalf Dri					1	Valley Pl STE 203		
City			State Zip		City		State	Zip
Cumberland			RI 02864		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		eceipt Date 06/30/2021	Deposit Date	Co	ntribution Amoun
	Check		Individual In Kind/Other Receipts De		00/30/2021			500.00
			in Kind Other Receipts De	serption				
		Con	tributor Information			Employe	r Data	
Prefix First	Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
Ann			Tikoian		Retired			
Street Address	s				Street Addr			
6 Elmhurst Dr			C		6 Elmhurst I)r		7 .
City Greenville			State Zip RI 02828		City Greenville		State RI	Zip 02828
	T					D		
Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 05/27/2021	Deposit Date	Co	ntribution Amoun 500.00
			In Kind/Other Receipts De					
			-	•				
		Con	tributor Information			Employe	r Data	
Prefix First	Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		_1	
Lisa	_		Tomasso		Street Addr	sociation of Rhode Isla	ma	
Street Address 40 York Drive	S				405 Promen			
City			State Zip		City	ade succi	State	Zip
Coventry			RI 02816		Providence		RI	02908
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/09/2021			250.00
			In Kind/Other Receipts De	scription				
D C E' 4	N		tributor Information	C CC	le i v	Employe	r Data	
Prefix First Mark	Name	MI A.	Last Name or PAC/Party Committee Name Tracy	Suffix	Employer N Cloud Agron			
Street Address		Α.	Tiacy		Street Addr			
39 Chapin Rd	,				1 Richmond			
City			State Zip		City	•	State	Zip
Barrington			RI 02806		Providence		RI	02906
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amoun
	Check		Individual		06/14/2021			1,000.00
			In Kind/Other Receipts De	scription				
							D (
		Con	tributor Information		Employar N	Employe	r Data	

Last Name or PAC/Party Committee Name

State

RI

Zip 02831

MI

V.

Tran

Prefix First Name

Street Address

2 Bridle Ct

City

Hope

Minh

Suffix

Employer Name

Street Address

North Attleboro

20 David Rd

Mini Systems, Inc.

State

MA

Zip

02760

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt D ate 06/15/2021	Deposit Date	Co	ntribution Amount 50.00
			In Kind/Other Receipts De	scription				
			ributor Information			Employ	er Data	
	First Name Melissa	MI D.	Last Name or PAC/Party Committee Name Travis	Suffix	Employer Na	ame Isulting Group		
		D.	ITAVIS					
Street Ad	Hollow Dr				Street Addre PO Box 113	ess		
	Hollow Di		State Zip				64-4-	Zip
City Cumberla	nd		RI 02864		City Barrington		State RI	02806
						D '/D /		
Item	Transaction Type		Contribution Type		eceipt D ate 06/10/2021	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Pessints De		00/10/2021			150.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employe	er Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		Data	
	Paul	M.	Treanor	Jania	Retired			
Street Ad					Street Addre	ess		
24 Anawa					24 Anawan R			
City			State Zip		City		State	Zip
Pawtucket	t		RI 02861		Pawtucket		RI	02861
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/06/2021	Depusit Date		1,000.00
			In Kind/Other Receipts De	scription				
			•	•				
		Cont	ributor Information			Employ	er Data	
Prefix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na	ame		
J	Toel .	P.	Trojan		Livity, LLC			
Street Ad	dress				Street Addre	ess		
1988 Loui	isquisset Pike				185 York Ave	•		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Pawtucket		RI	02860
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			100.00
			In Kind/Other Receipts De	scription				
			ributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Peter	G	Trombley		Self - Lobbyi			
Street Ad	dress ott Avenue				Street Addre			
	ou Avenue		Stt- 7:			avenue	64-4-	7:
City Middletov	T.P.		State Zip RI		City Middletown		State RI	Zip
				_		D 11-7-1		
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amount
	Check		Individual		06/21/2021			50.00
			In Kind/Other Receipts De	scription				
		Cont	ributor Information			Employe	ar Data	
Profix I	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na		er Data	
riena I	II St I TAILLE	1411	Tass Name of TAC/Tarty Committee Name	J-	Employer N	HILL		

Jr.

Homeless Advocate

State

RI

Zip

02886

Street Address

PO Box 7089 City

Warwick

Albert

Street Address

PO Box 7089

City

Warwick

Turner

State

RI

Zip

02886

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/15/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	escription				
		Cont	ributor Information			Funler	on Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		yer Data	
псиа	Joseph	.,	Tutsch	Julia	New Englan			
Street A	ddress				Street Addr	ess		
490 Wir	throp St				490 Winthro	p St		
City			State Zip		City		State	Zip
Taunton			MA 02780		Taunton		MA	02780
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/23/2021	Deposit Date	Co	ntribution Amount 250.00
	Check		In Kind/Other Receipts De		00/23/2021			250.00
			•	•				
		Cont	ributor Information			Employ	er Data	
Prefix	First Name Michael	MI J	Last Name or PAC/Party Committee Name Urso	Suffix	Employer N Retired	lame		
Street A	ddress				Street Addr	ess		
222 Pos	t Road, Unit 10B				222 Post Ro	ad, Unit 10B		
City			State Zip		City		State	Zip
Westerly	1		RI 02891		Westerly		RI	02891
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 04/06/2021	Deposit Date	Co	ntribution Amount 1,000.00
	Check		In Kind/Other Receipts De		04/00/2021			1,000.00
		Cont	ributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
C44 A	Karen		Vallas		Canna Pharr	_		
Street A					Street Addr 38 Salem Dr			
City			State Zip		City	•	State	Zip
Attlebo	о		MA 02703		North Provid	dence	RI	02904
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/14/2021			200.00
			In Kind/Other Receipts De	escription				
		C 4	7 (7 6)			F 1	D 4	
Prefix	First Name	MI	ributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N		er Data	
110111	Paul	.,	Vanasse	Surra		e & Associates Real	Estate	
Street A	ddress				Street Addr	ess		
1849 OI	d Louisquisset Pike				1849 Old Lo	ouisquisset Pike		
City			State Zip		City		State	Zip
Lincoln			RI 02865		Lincoln		RI	02865
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/16/2021			75.00
			In Kind/Other Receipts De	escription				

Last Name or PAC/Party Committee Name

State

RI

Zip

02864

VAUDREUIL

Prefix First Name

Street Address

44 Temple Place

Central Falls

City

KEN

Suffix

Employer Name

Street Address

Central Falls

Broad St

City

City of Centrall Falls

State

RI

Zip

Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Contribution Amoun	
	Check		Individual	(04/20/2021		1,000.00	
In Kind/Other Receipts Description								
Contributor Information Employer Data								
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame		
	Mi-1-1		T7		T O.C	CM:-11 T 17-11-		

		Con	tributor Information	Employer Data				
Prefix	First Name	MI	Last Name or PAC/Party Committee Name Suffix Employer Name					
	Nicholas		Vaz		Law Office of Michael James Kelley			
Street A	treet Address Street Address							
180 Bay	view Avenue				10 Dorrance St #700			
City			State Zip		City	State	Zip	
Berkley	•		MA 02779		Providence	RI	02903	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount	
	Check		Individual		06/08/2021		1,000.00	

I., I/:	d/Other	Dogginta	Description
10 80	a/Otner	Receibts	Describuon

		Con	tributor Information		Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	Anthony	V.	Victoria		Auto Service Auto Body			
Street A	Address				Street Address			
171 Chi	imney Rock Dr				165 Frenchtown Rd			
City			State Zip		City	State	Zip	
North K	Kingstown		RI 02852		North Kingstown	RI	02852	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount	
	Check		Individual		06/07/2021		1,000.00	

In Kind/Other Receipts Description

		Con	tributor Information	Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Joseph	R	Vinagro		J.R. Vinagro Corp		
Street A	Address				Street Address		
PO Box	248				2208 Plainfield Pike		
City			State Zip		City	State	Zip
North S	cituate		RI 02857		Johnston	RI	02919
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount
	Credit/Debit Card		Individual		06/23/2021		1,000.00

In Kind/Other Receipts Description

		tributor Information	Employer Data					
Prefix	refix First Name MI Last Name or PAC/Party Committee Name Suffix Employer Name							
	Amy		Vitale		The Beacon Mutual Insurance Company			
Street A	Address				Street Address			
10 Acad	cia Rd				10 Acacia Rd			
City			State Zip		City	State	Zip	
Bristol			RI 02809		Bristol	RI	02809	
Item	Transaction Type		Contribution Type	R	Receipt Date Deposit Date	Co	ntribution Amount	
	Check		Individual		05/21/2021		500.00	

In Kind/Other Receipts Description

		Employer Data							
Prefix	Prefix First Name MI Last Name or PAC/Party Committee Name Suffix					Employer Name			
	Joseph	W	Walsh	Government Strategies, Inc.					
Street A	Street Address					Street Address			
31 Fox	idge Crescent					335 Centerville Rd, Bldg 4			
City	City State Zip					City	State	Zip	
Warwick			RI	02886		Warwick	RI	02886	

Item	Transaction Type Check		Contribution Type Individual		eceipt Date 05/19/2021	Deposit Date	Con	ntribution Amou 500.0
			In Kind/Other Receipts De	scription				
							_	
D 6	T1 3.7		tributor Information	G 60	I	Employ	er Data	
Prefix	First Name William	MI G.	Last Name or PAC/Party Committee Name Walsh	Suffix	Employer N	t Strategies, Inc.		
Street A		G.	Walsh		Street Addr			
27 Lando					335 Centery			
City			State Zip		City		State	Zip
Warwick			RI 02889		Warwick		RI	02886
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Cor	ntribution Amou
	Check		Individual		05/13/2021	•		1,000.0
			In Kind/Other Receipts De	scription				
			tributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Christy	R.	Walton		1 .	ed Philanthropist		
Street At PO Box 1					Street Addr PO Box 186			
City	1800		State Zip		City	· ·	State	Zip
Bentonvi	lle		AR 72712		Bentonville		AR	72712
Item	Transaction Type		Contribution Type	D	eceipt Date	Deposit Date		ntribution Amou
Hem	Check		Individual		06/30/2021	Deposit Date	Co	500.0
			In Kind/Other Receipts De					
			•	•				
		Con	tributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Patrick		Ward		State of Rho			
Street A					Street Addr	ress		
50 Pocas	set Ave		C		82 Smith St			
City Providen	20		State Zip RI 02909		City Providence		State RI	Zip 02903
					·			
Item	Transaction Type		Contribution Type		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amou 500.0
	Check		Individual In Kind/Other Receipts De		00/21/2021			300.0
			III KIII WORKI KEELIPIS DE	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	lame		
	Patrick		Ward		State of Rho	de Island		
Street A	ldress				Street Addr	ress		
50 Pocas	set Ave				82 Smith St			
City			State Zip		City		State	Zip
Providen	ce		RI 02909		Providence		RI	02903
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amou
	Credit/Debit Card		Individual		06/08/2021			500.0
			In Kind/Other Receipts De	scription				
		C	h-ib-ston Info			F1	D.4-	
Profix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
TICHX	r ii at I taille	TATE	Last Name of TAC/Tarty Committee Name	Sumix	Employer IV	ante		

State

TX

Nathaniel

Street Address

City

Austin

1713 Bluebonnet Ln

Ware

Forte Global, Inc

1713 Bluebonnet Ln

Zip 78704

State

TX

Street Address

City

Austin

Item	Transaction Type Check		Contribution Type Individual		Receipt Date 04/20/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
		•				F 1	D 4	
Prefix F	iret Nama	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
	ay	WII	Warner	Sumx	Method Adv			
Street Add	lress				Street Addr	ess		
29 Anne Ro	d				192 South S	treet, #600		
City			State Zip		City		State	Zip
North And	over		MA 01845		Boston		MA	02111
Item	Transaction Type Check		Contribution Type Individual		deceipt Date 04/20/2021	Deposit Date	Co	ntribution Amount
	CHCK		In Kind/Other Receipts De		0 1/20/2021			1,000.00
			•	•				
		Con	tributor Information			Employ	er Data	
	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Vame		
Street Add	heoren	L.	Warner	Jr.	Retired Street Addr			
141 Elm St						eet, Apt. 101		
City	,,- , -		State Zip		City	, 	State	Zip
Andover			MA 01810-1600		Andover		MA	01810
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/21/2021			100.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	on Data	
Prefix F	irst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		ei Data	
	Ierb		Weiss		CIty of Paw			
Street Add	lress				Street Addr	ess		
100 Marbu	ry Ave				137 Rooseve	elt Ave		
City			State Zip		City		State	Zip
Pawtucket			RI 02860		Pawtucket		RI	02860
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual In Kind/Other Receipts De		04/06/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix F	ïrst Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Jo	oseph	L.	Welch		East Coast C	Cultivation, LLC		
Street Add					Street Addr			
470 Diamo	ond Hill Rd				10 Dawn La	ne, Bldg C	.	
City Warwick			State Zip RI 02886		City Warwick		State RI	Zip 02886
	т с т			-	l	Domesti D. (
Item	Transaction Type Check		Contribution Type Individual		Receipt Date 04/02/2021	Deposit Date	Co	ntribution Amount 500.00
	Carre		In Kind/Other Receipts De					500.00
		Con	tributor Information			Employ	er Data	
Duefer E	inst Name	МТ	Last Name or PAC/Party Committee Name		Employer N			

Prefix First Name

Street Address

25 Esten Avenue

City

Pawtucket

Guy

MI

Williams

L.

Last Name or PAC/Party Committee Name

State

RI

Zip

02860

Suffix

Employer Name

Street Address

City

Pawtucket

25 Esten Avenue

Factory Carpet Outlet Co.

State

RI

Zip

02860

Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution .	
	Check		Individual In Kind/Other Pessints De		06/13/2021				250.00
			In Kind/Other Receipts De	scription					
		Con	tributor Information			Employe	r Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	ame			
	Michael	P.	Winter		Builders Sur	-			
Street A 2457 Po	Address ost Rd				94 Industrial				
City Warwic	k		State Zip RI 02886		City West Warwig	ck	State RI	Zip 02893	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution .	Amount
	Credit/Debit Card		Individual		06/14/2021				500.00
			In Kind/Other Receipts De	scription					
		C	4.:			F	D.4.		
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data		
	Marth		Wofford			& Blue Shield of RI			
Street A	Address				Street Addr	ess			
1400 CI	herryville Rd				500 Exchang	ge St			
City	1774		State Zip		City		State	Zip	
Greenw	vood Village		CO 80121		Providence		RI	02903	
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 05/19/2021	Deposit Date	Co	ntribution .	Amount 500.00
	CHCCK		In Kind/Other Receipts De		03/17/2021				300.00
			<u> </u>	ser-puon					
		Con	tributor Information			Employe	r Data		
Prefix		MI	Last Name or PAC/Party Committee Name	Suffix	Employer N				
	Gayle	J.	Wolf			Strategies, Inc.			
	Address Philip Rd				Street Addr	ess ille Rd, Bldg 4			
City	i mip iku		State Zip		City	ine Ru, Diug 4	State	Zip	
Narraga	ansett		RI 02882-1101		Warwick		RI	02886	
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution .	Amount
	Check		Individual		06/21/2021				200.00
			In Kind/Other Receipts De	scription					
		•					D /		
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employe	er Data		
Trenx	Sidney	M.	Wordell	Sum		iefs' Association			
Street A	Address				Street Addr	ess			
274 Lor	ng Hwy				250 Conanic	us Ave			
City			State Zip		City		State	Zip	
Little C	Compton		RI 02837		Jamestown		RI	02835	
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution .	
	Check		Individual		06/17/2021				500.00
			In Vind/Other Dessirt De	comintion					
			In Kind/Other Receipts De	scription					

Contributor Information Employer Data MI Last Name or PAC/Party Committee Name Suffix Prefix First Name Employer Name Robert W. Wotherspoon Interbuild Inc. Street Address Street Address 62 Sheldon St 101 Higginson Ave City State Zip City Zip State RI 02906 RI 02865 Providence Lincoln

Item	Transaction Type Credit/Debit Card		Contribution Type Individual		eceipt Date 06/14/2021	Deposit Date	Co	ontribution Amount 500.00
			In Kind/Other Receipts De	scription				
		C	tributor Information			F	D-4-	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N	Employer l	Data	
Ticha	Bryan	P	Yagoobian	Julia		e Energy LLC		
Street A	Address		_		Street Addr	ess		
251 Jun	iper Rd				4160 Old Po	st Rd. Suite 104 & 105		
City			State Zip		City		State	Zip
Wakefie	eld		RI 02879-5504		Charlestown	ı	RI	02813
Item	Transaction Type Check		Contribution Type Individual		eceipt Date 06/08/2021	Deposit Date	Co	ntribution Amount 1,000.00
			In Kind/Other Receipts De	scription				
			tributor Information		T =	Employer	Data	
Prefix	First Name Kevin	MI	Last Name or PAC/Party Committee Name Yeaw	Suffix	Employer N Green Hill F			
Stroot	Address		ieaw		Street Addr			
	fe Drive				9 Okeefe Dr			
City			State Zip		City		State	Zip
Wood F	liver Junction		RI 02894		Wood River	Junction	RI	02894
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		06/23/2021			1,000.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employer l	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
	Chris	C	Young		Nicholas Piz	zza		
	Address				Street Addr			
380 Bo	radway		a		38 Memoria	l Blvd. West	a	~.
City Newpor	+		State Zip RI 02840		City Newport		State RI	Zip 02840
_					_	D '(D (
Item	Transaction Type Check		Contribution Type Individual		eceipt D ate 05/20/2021	Deposit Date	Co	ntribution Amount 1.000.00
			In Kind/Other Receipts De					_,
			-	-				
			tributor Information			Employer l	Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N			
Street	Scot Address	H.	Zajic		Safelite Gro	•		
	Ocotillo Ln				7400 Safelit			
City			State Zip		City	,	State	Zip
Phoenix	.		AZ 85028-5025		Columbus		ОН	43235
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual		04/12/2021			250.00
			In Kind/Other Receipts De	scription				
		-				.	D 4	
		Con	tributor Information	0.00		Employer	Data	

Last Name or PAC/Party Committee Name

State

RI

Zip

02852-4138

Zerbinopoulos

Suffix

Employer Name

Street Address

South Kingstown

Rhode Island Eye Institute

55 Village Square Dr, Suites 24A & B

Zip

02879

State

RI

Prefix First Name

Street Address

North Kingstown

22 Carrie Ln

Paul

Item	Transaction Type Check		Contribution Typ Individual	e		eceipt Date 06/04/2021	Deposit Date	Ca	ntribution Amount 500.00
			In Kind/Oth	er Receipts De	scription				
		Contributor In					Employ	er Data	
	First Name		ne or PAC/Party Com	ımittee Name	Suffix	Employer N			
_	Norman	R. Ziola			Jr.		lance & Wellness Ne	twork	
Street Add						Street Addr			
2226 Lipa	n Ct						ern Ave, Ste 110	~	
City			State NV	Zip 89123		City		State	Zip 89101
Las Vegas			NV	89123		Las Vegas		NV	89101
Item	Transaction Type		Contribution Typ	e		eceipt Date	Deposit Date	Co	ntribution Amount
	Check		Individual			04/06/2021			500.00
			In Kind/Oth	er Receipts De	scription				
							T 1	D /	
D.C.	First Name	Contributor In			C	F 2	Employ	er Data	
	First Name Gerald	MI Last Nan F. Zito	ne or PAC/Party Com	imittee Name	Suffix	Employer N Bayside Gro			
Street Ad		r. 2110				Street Addr			
143 Hiller						PO Box 688			
City	estAve		State	Zip		City	.5	State	Zip
Providence	P		RI	02909		Warwick		RI	02887
						<u> </u>			
Item	Transaction Type Check		Contribution Typ NSF Check	e		eceipt Date 04/30/2021	Deposit Date	Co	ntribution Amount 1,000.00-
	Check			an Dansinta Da		04/30/2021			-1,000.00
nafan ta n	andran about monaid		III KIIIG/Oth	er Receipts De	scription				
Teler to II	naker - check unpaid	Contributor In	formation				Employ	ou Doto	
Profix I	First Name		ne or PAC/Party Com	mittae Name	Suffix	Employer N		ei Data	
	George	A. Economo	-	imittee ivame	Sum	Triton Collis			
Street Add						Street Addr			
11 Mary A						352 Walcott			
City			State	Zip		City		State	Zip
Cranston			RI	02921		Pawtucket		RI	02860
Item	Transaction Type		Contribution Typ		D	eceipt Date	Deposit Date	Co	ntribution Amount
Hein	Check		PAC PAC	e		06/09/2021	Deposit Date	Co	1,000.00
	CHCCK			er Receipts De		00/03/2021			1,000.00
			III Kilid Oth	ici Accepts De	scription				
		Contributor In	formation				Employ	er Data	
Prefix I	First Name		ne or PAC/Party Com	mittee Name	Suffix	Employer N			
		AMICA/	•			' '			
Street Add	dress					Street Addr	ess		
100 AMIC	CA WAY								
City			State	Zip		City		State	Zip
LINCOLN	1		RI	02865					
Item	Transaction Type		Contribution Typ	e	R	eceipt Date	Deposit Date	Co	ntribution Amount
	Check		PAC			05/19/2021		3.	1,000.00
			In Kind/Oth	er Receipts De	scription				
				•	-				
		Contributor In	formation				Employ	er Data	
Prefix I	First Name	MI Last Nan	ne or PAC/Party Com	nmittee Name	Suffix	Employer N	Vame		
			Construction Industr			ı			

CIRI PAC (Construction Industries of RI)

State

RI

Zip

02886

Street Address

State Zip

City

Street Address

WARWICK

City

615 JEFFERSON BOULEVARD

Item	Transaction Type Check		Contribution Type PAC		Receipt D ate 04/08/2021	Deposit Date	Con	ntribution Amoun 500.00
			In Kind/Other Receipts Des	cription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name CITIZENS BANK PACOM	Suffix	Employer N			
Street A	ddress EN PLAZA 12TH FLOOR				Street Addre	ess		
City PROVID	DENCE		State Zip RI 02903		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/21/2021	Deposit Date	Con	ntribution Amoun 200.00
			In Kind/Other Receipts Des	cription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer N		CI Data	
Street A			COVENTRY PROFESSIONAL FIREFIGHTERS	P.	Street Addre	ess		
P O BOX			State Zip		City		State	Zip
COVEN			RI 02816			D 11D 1		
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/22/2021	Deposit Date	Coi	ntribution Amoun 1,000.00
			In Kind/Other Receipts Des	cription				
		•				Б. 1	D.	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ	er Data	
			COX PAC: COMMITTEE FOR FAIR BROADBA					
Street A					Street Addre	ess		
City	S P MURPHY HIGHWAY		State Zip		City		State	Zip
-	VARWICK		RI 02893					
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/21/2021	Deposit Date	Cor	ntribution Amoun
			In Kind/Other Receipts Des	cription				
		Con	tributor Information			Employ	on Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name CRANSTON FIREFIGHTERS LOCAL 1363 CO	Suffix	Employer N		ei Data	
Street A	ddress				Street Addre	ess		
P.O. BOX	X 10358				611		8	
City CRANS	ION		State Zip RI 02910		City		State	Zip
Item	Transaction Type		Contribution Type		Receipt Date	Deposit Date	Cor	ıtribution Amoun
	Check		PAC		06/25/2021			500.00
			In Kind/Other Receipts Des	cription				
		Con	tributor Information			Employ	er Data	
	First Name	MI	Last Name or PAC/Party Committee Name CREDIT UNION PAC OF RI	Suffix	Employer N	ame		
Street A	ddress NCIS STREET				Street Addre	ess		
City PROVID	DENCE		State Zip RI 02903-9937		City		State	Zip

Item	Transaction Type Check		Contribution Type PAC		eceipt D ate 06/14/2021	Deposit Date	Con	ntribution Amoun
			In Kind/Other Receipts De	scription				
		C	4			Familia	D.4.	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ Jame	er Data	
			DELTA DENTAL OF RI PAC					
	Address				Street Addr	ess		
	ARLES STREET							
City PROVI	IDENCE		State Zip RI 02904		City		State	Zip
Item	Transaction Type		Contribution Type	R	eceipt Date	Deposit Date	Co	ntribution Amount
Tiem.	Electronic Pay Syste	m	PAC		05/10/2021	Deposit Date	Cu	1,000.00
			In Kind/Other Receipts De	scription				
		•	. 7 . 7			F 1	D /	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer N	Employ Jame	er Data	
110111	THE PARTY	.,	DEMOCRATIC GOVERNORS ASSOCIATION		Employer			
Street	Address				Street Addr	ess		
	YE ST NW							
City	INGTON		State Zip DC 20005		City		State	Zip
						D	C	4-11-4i A
Item	Transaction Type Check		Contribution Type PAC		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution Amount 250.00
			In Kind/Other Receipts De					
			-	_				
			tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name EAST PROVIDENCE FIREFIGHTERS LOCAL	Suffix	Employer N	ame		
Street A	Address				Street Addr	ess		
PO BO	X 14355							
			State Zip		City		State	Zip
City								
EAST I	PROVIDENCE		RI 02914					
•	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Con	ntribution Amoun
EAST I			Contribution Type PAC	(eceipt Date 06/21/2021	Deposit Date	Con	ntribution Amoun
EAST I	Transaction Type		Contribution Type	(-	Deposit Date	Con	
EAST I	Transaction Type Check	Con	Contribution Type PAC In Kind/Other Receipts Des	scription	06/21/2021	Employ		
EAST I	Transaction Type	Con	Contribution Type PAC In Kind/Other Receipts Destributor Information Last Name or PAC/Party Committee Name	(-	Employ		
EAST I Item	Transaction Type Check First Name		Contribution Type PAC In Kind/Other Receipts Des	scription	06/21/2021 Employer N	Employ		
EAST I Item Prefix Street A	Transaction Type Check		Contribution Type PAC In Kind/Other Receipts Destributor Information Last Name or PAC/Party Committee Name	scription	06/21/2021	Employ		
EAST I Item Prefix Street A	Transaction Type Check First Name Address		Contribution Type PAC In Kind/Other Receipts Destributor Information Last Name or PAC/Party Committee Name	scription	06/21/2021 Employer N	Employ		
EAST I Item Prefix Street A 169 BC City	Transaction Type Check First Name Address		Contribution Type PAC In Kind/Other Receipts Destributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC	scription	Employer N Street Addr	Employ	er Data	100.00
EAST I Item Prefix Street A 169 BC City	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type		Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type	Suffix	Employer N Street Addr City eceipt Date	Employ	er Data State	Zip
Prefix Street A 169 BO City NARR	Transaction Type Check First Name Address ONNET SHORES ROAD AGANSETT		Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type PAC	Suffix R	Employer N Street Addr	Employ Tame	er Data State	Zip
Prefix Street A 169 BO City NARRA	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type		Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type	Suffix R	Employer N Street Addr City eceipt Date	Employ Tame	er Data State	Zip
Prefix Street A 169 BO City NARR	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type	MI	Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type PAC	Suffix R	Employer N Street Addr City eceipt Date	Employ Tame	er Data State	Zip
Prefix Street A 169 BC City NARRA Item	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type	MI	Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name	Suffix Rescription Suffix	Employer N Street Addr City eceipt Date	Employ Tame ess Deposit Date Employ	er Data State	Zip
Prefix Street A 169 BC City NARRA Item	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type Check First Name	MI	Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type PAC In Kind/Other Receipts Descributor Information	Suffix Rescription Suffix	Employer N Street Addr City eccipt Date 06/17/2021 Employer N	Employ Tame ess Deposit Date Employ Tame	er Data State	100.00
Prefix Street A 169 BC City NARRA Item	Transaction Type Check First Name Address DNNET SHORES ROAD AGANSETT Transaction Type Check First Name Address	MI	Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name FIRE CHIEFS PAC State Zip RI 02882 Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name	Suffix Rescription Suffix	Employer N Street Addr City ecceipt Date 06/17/2021	Employ Tame ess Deposit Date Employ Tame	er Data State	Zip

State RI

City BARRINGTON City

Item	Transaction Type		Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check		PAC In Kind/Other Receipts Descriptio	06/15/2021		500.00
			in innovanci receipis Descriptio			
		Con	tributor Information	_	Employ	er Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name Suffi IBEW LOCAL 99 PAC (International Brotherhood c	x Employer N	lame	
Street	Address		IDEW LOCAL 99 PAC (international Biomernood C	Street Addı	229	
	FLEX DRIVE					
City			State Zip	City		State Zip
CRAN			RI 02921			
Item	Transaction Type Check		Contribution Type PAC	Receipt Date 06/21/2021	Deposit Date	Contribution Amount 200.00
	CHECK		In Kind/Other Receipts Descriptio			200.00
			· · · · · · · · · · · · · · · · · · ·			
			tributor Information	_	Employ	er Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name Suffi INDEPENDENT CONSTABLE ASSOCIATION PA	x Employer N	lame	
Street A	Address		INDEPENDENT CONSTRBLE ASSOCIATION PA	Street Addı	ess	
	AVER ROAD					
City			State Zip	City		State Zip
JOHNS			RI 02919			
Item	Transaction Type Check		Contribution Type PAC	Receipt Date 06/16/2021	Deposit Date	Contribution Amount 500.00
	Check		In Kind/Other Receipts Descriptio			500.00
		Con	tributor Information		Employ	on Data
		CUI				er Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37	x Employer N		er Data
Street A	Address		Last Name or PAC/Party Committee Name Suffi	Employer N	Jame	er Data
Street A			Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37	Street Addr	Jame	
Street A 845 WA City	Address		Last Name or PAC/Party Committee Name Suffi		Jame	State Zip
Street A 845 WA City	Address ATERMAN AVENUE		Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip	Street Addr	Jame	
Street A 845 WA City EAST I	Address ATERMAN AVENUE PROVIDENCE		Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC	Street Addr City Receipt Date 06/08/2021	ame	State Zip
Street A 845 WA City EAST I	Address ATERMAN AVENUE PROVIDENCE Transaction Type		Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type	Street Addr City Receipt Date 06/08/2021	ame	State Zip Contribution Amount
Street A 845 WA City EAST I	Address ATERMAN AVENUE PROVIDENCE Transaction Type	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description	Street Addr City Receipt Date 06/08/2021	Pame Pess Deposit Date	State Zip Contribution Amount 1,000.00
Street A 845 WA City EAST I	Address ATERMAN AVENUE PROVIDENCE Transaction Type	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC	Street Addr City Receipt Date 06/08/2021	Deposit Date Employ	State Zip Contribution Amount 1,000.00
Street A 845 WA City EAST I	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Descriptio	Street Addr City Receipt Date 06/08/2021	Deposit Date Employ	State Zip Contribution Amount 1,000.00
Street A 845 WA City EAST I Item Prefix	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi	Street Addr City Receipt Date 06/08/2021	Deposit Date Employ	State Zip Contribution Amount 1,000.00
Street A 845 WA City EAST I Item Prefix Street A 857 CE	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating	Street Addr City Receipt Date 06/08/2021 n Employer N Street Addr	Deposit Date Employ	State Zip Contribution Amount 1,000.00 eer Data
Street A 845 WA City EAST I Item Prefix Street A	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi	Street Addr City Receipt Date 06/08/2021 n	Deposit Date Employ	State Zip Contribution Amount 1,000.00
Street A 845 WA City EAST I Item Prefix Street A 857 CE City	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating	Street Addr City Receipt Date 06/08/2021 n Employer N Street Addr	Deposit Date Employ	State Zip Contribution Amount 1,000.00 eer Data
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating State Zip RI 02919	Street Addr City Receipt Date 06/08/2021 Employer N Street Addr City	Deposit Date Employ Vame	State Zip Contribution Amount 1,000.00 rer Data State Zip
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE STON Transaction Type	MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating State Zip RI 02919 Contribution Type	Street Addr City Receipt Date 06/08/2021 Employer M Street Addr City Receipt Date 06/21/2021	Deposit Date Employ Vame	State Zip Contribution Amount 1,000.00 rer Data State Zip Contribution Amount
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE STON Transaction Type	Con MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating State Zip RI 02919 Contribution Type PAC In Kind/Other Receipts Description	Street Addr City Receipt Date 06/08/2021 Employer M Street Addr City Receipt Date 06/21/2021	Deposit Date Employ Vame Pess Deposit Date	State Zip Contribution Amount 1,000.00 er Data State Zip Contribution Amount 500.00
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS Item	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE STON Transaction Type	Con MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating State Zip RI 02919 Contribution Type PAC In Kind/Other Receipts Description tributor Information	Street Adda City Receipt Date 06/08/2021 n Street Adda City Receipt Date 06/21/2021	Deposit Date Employ Vame Deposit Date Employ	State Zip Contribution Amount 1,000.00 er Data State Zip Contribution Amount 500.00
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS Item	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE STON Transaction Type Check	Con MI	Last Name or PAC/Party Committee Name IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Sufficure IUOE LOCAL 57 (International Union of Operating) State Zip RI 02919 Contribution Type PAC In Kind/Other Receipts Description tributor Information	Street Adda City Receipt Date 06/08/2021 n Street Adda City Receipt Date 06/21/2021	Deposit Date Employ Vame Deposit Date Employ	State Zip Contribution Amount 1,000.00 er Data State Zip Contribution Amount 500.00
Street A 845 WA City EAST I Item Prefix Street A 857 CE City JOHNS Item Prefix	Address ATERMAN AVENUE PROVIDENCE Transaction Type Check First Name Address ENTRAL AVENUE STON Transaction Type Check	Con MI	Last Name or PAC/Party Committee Name Suffi IRON WORKERS LOCAL 37 State Zip RI 02914 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IUOE LOCAL 57 (International Union of Operating State Zip RI 02919 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi IVOE LOCAL 57 (International Union of Operating State Zip RI 02919 Contribution Type PAC In Kind/Other Receipts Description tributor Information Last Name or PAC/Party Committee Name Suffi	Street Adda City Receipt Date 06/08/2021 n Street Adda City Receipt Date 06/21/2021	Deposit Date Employ Vame Deposit Date Employ Vame	State Zip Contribution Amount 1,000.00 er Data State Zip Contribution Amount 500.00

State RI

City JOHNSTON City

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Item	Transaction Type Check		Contribution Type PAC		eceipt D ate 06/21/2021	Deposit Date	Cor	ntribution Amou 500.0
	Check		In Kind/Other Receipts Descri		00/21/2021			500.0
								
		Con	tributor Information				er Data	
Prefix	First Name	MI	ž	Suffix	Employer N	ame		
Stroot	Address		LINCOLN LOCAL 3023 PAC		Street Addr	055		
PO BO					Street Autil	ess		
City			State Zip		City		State	Zip
LINCO	DLN		RI 02865					
Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Cor	ntribution Amou
	Check		PAC		06/17/2021			250.0
			In Kind/Other Receipts Descri	iption				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI		Suffix	Employer N			
			NEANK PAC (National Education Association Nort					
	Address				Street Addr	ess		
	AIRWAY DRIVE		St. 4		C''		64.4	7.
City NORTI	H KINGSTOWN		State Zip RI 02852		City		State	Zip
Item	Transaction Type		Contribution Type	D.	eceipt Date	Deposit Date	Cox	ntribution Amou
Hem	Check		PAC		06/21/2021	Deposit Date	Cui	500.0
			In Kind/Other Receipts Descri	iption				
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Prefix	First Name	MI	ž.	Suffix	Employer N	ame		
		MI	Last Name or PAC/Party Committee Name NEARI PACE (National Education Association of R					
Street	First Name Address LD HILL ROAD	MI			Employer N Street Addre			
Street	Address	MI					State	Zip
Street 2	Address LD HILL ROAD	MI	NEARI PACE (National Education Association of R		Street Addr		State	Zip
Street A	Address LD HILL ROAD	MI	NEARI PACE (National Education Association of R State Zip RI 02920 Contribution Type	Re	Street Addro			ntribution Amou
Street A 99 BAI City CRAN	Address LD HILL ROAD STON	MI	NEARI PACE (National Education Association of R State Zip RI 02920 Contribution Type PAC	Re	Street Addr	ess		
Street A 99 BAI City CRAN	Address LD HILL ROAD STON Transaction Type	MI	NEARI PACE (National Education Association of R State Zip RI 02920 Contribution Type	Re	Street Addro	ess		ntribution Amou
Street A 99 BAI City CRAN	Address LD HILL ROAD STON Transaction Type		NEARI PACE (National Education Association of R State Zip RI 02920 Contribution Type PAC	Re	Street Addro	Deposit Date		ntribution Amou
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Street 2 99 BAI City CRAN	Address LD HILL ROAD STON Transaction Type Check	Con	NEARI PACE (National Education Association of R State Zip RI 02920 Contribution Type PAC In Kind/Other Receipts Descrittributor Information	Ro (iption	Street Addre City eceipt Date 06/21/2021 Employer N	Deposit Date Employ	Con	ntribution Amou
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State RI

City LINCOLN City

Item	Transaction Type		Contribution Type		eceipt Date	Deposit Date	Co	ntribution A	
	Check		PAC In Kind/Other Receipts Desc		06/20/2021				600.00
			III Killa/Other Receipts Desc	cription					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name PAWTUCKET FIREFIGHTERS LOCAL 1261 PA	Suffix	Employer N	ame			
Street	Address		PAW TUCKET FIREFIGHTERS LOCAL 1201 PA	iC .	Street Addr	ess			
	OSEVELT AVE				Street Auth	633			
City			State Zip		City		State	Zip	
PAWTU			RI 02861						
Item	Transaction Type Check		Contribution Type PAC		eceipt D ate 06/21/2021	Deposit Date	Co	ntribution A	500.00
	CHECK		In Kind/Other Receipts Desc		00/21/2021				300.00
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			tributor Information				er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name PLUMBERS & PIPEFITTERS LOCAL 51 PAC	Suffix	Employer N	lame			
Street A	Address		PLONDERS & FIFEITITERS LOCAL ST FAC		Street Addr	ess			
	MINGWAY DRIVE								
City			State Zip		City		State	Zip	
EAST	PROVIDENCE		RI 02915		<u> </u>				
Item	Transaction Type Check		Contribution Type PAC		eceipt Date 06/17/2021	Deposit Date	Co	ntribution A	500.00
	CHCCK		In Kind/Other Receipts Desc		00/17/2021				500.00
				-					
		Con	tributor Information			Employ	er Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name PROVIDENCE LODGE 3 COPE	Suffix	Employer N	lame			
Street	Address	MI		Suffix	Employer N Street Addr				
Street A		MI	PROVIDENCE LODGE 3 COPE	Suffix	Street Addr		State	7:	
Street A 40 SHE City	Address	MI		Suffix			State	Zip	
Street A 40 SHE City	Address RIDAN STREET	MI	PROVIDENCE LODGE 3 COPE State Zip		Street Addr			Zip ntribution A	mount
Street A 40 SHE City PROVI	Address ERIDAN STREET DENCE	MI	PROVIDENCE LODGE 3 COPE State Zip RI 02909 Contribution Type PAC	R	Street Addr	ess		ntribution A	mount 000.00
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Street A 40 SHE City PROVI Item Prefix Street A 23 UNI City BRISTO	Address CRIDAN STREET DENCE Transaction Type Check First Name Address ON STREET OL Transaction Type	Con	State Zip RI 02909 Contribution Type PAC In Kind/Other Receipts Descributor Information Last Name or PAC/Party Committee Name PROVIDENCE RI CENTRAL FEDERATED COUNTY State Zip RI 02809 Contribution Type PAC	R cription Suffix UI	Street Addr City Ecceipt Date 06/09/2021 Employer N Street Addr City Ecceipt Date	Deposit Date Employ Tame ess Deposit Date	er Data State	ntribution A 1,0 Zip	000.00
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Zip 02940-0344

State RI

City PROVIDENCE City

Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/11/2021	Deposit Date	Con	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI AFL-CIO PAC	Suffix	Employer Na			
Street Ad 194 SMIT	ldress ГН STREET				Street Addre	ess		
City PROVID	ENCE		State Zip RI 02908		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 05/14/2021	Deposit Date	Con	atribution Amount 500.00
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employ	or Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI AUTOMOBILE DEALERS PAC	Suffix	Employer N		er Data	
Street Ad	ldress TERVILLE ROAD, SUITE 4	l			Street Addre	ess		
City WARWIO			State Zip RI 02886		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 04/07/2021	Deposit Date	Cor	ntribution Amount
			In Kind/Other Receipts De	scription				
		•					D .	
Prefix	First Name	MI	tributor Information Last Name or PAC/Party Committee Name	Suffix	Employer Na	Employ	er Data	
			RI HEALTH CARE ASSOCIATION PAC		Zimpio, ci i i			
Street Ad					Street Addre	ess		
5/ KILVI City	ERT STREET, SUITE 200		State Zip		City		State	Zip
WARWIC	CK		RI 02886		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/17/2021	Deposit Date	Con	atribution Amount
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI LABORER'S POLITICAL LEAGUE	Suffix	Employer Na			
Street Ad 410 SOU	ldress TH MAIN STREET				Street Addre	ess		
City PROVIDE	ENCE		State Zip RI 02903		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/16/2021	Deposit Date	Cor	atribution Amount
			In Kind/Other Receipts De	scription				
		Cont	tributor Information			Employ	or Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI LABORERS' PUBLIC EMPLOYEES PAC	Suffix	Employer Na		or Data	
Street Ad 410 SOU	ldress TH MAIN STREET				Street Addre	ess		
City PROVID	ENCE		State Zip RI 02903		City		State	Zip

Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/09/2021	Deposit Date	Con	ntribution Amount 200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI MEDICAL PAC	Suffix	Employer Na			
	Address OMENADE STREET STE A				Street Address	s		
City PROVI	DENCE		State Zip RI 02908		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/21/2021	Deposit Date	Con	atribution Amount 200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Na			
	Address		RI NAGE/IBPO PAC (National Assoc of Gov Ed	mple	Street Address	s		
15 MES City WARW	SSENGER DRIVE		State Zip RI 02888		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/15/2021	Deposit Date	Cor	ntribution Amount
	CHECK		In Kind/Other Receipts De					330.00
				•				
D C	First Name		tributor Information	6, 65	T 1 N	Employ	er Data	
Prenx	rirst Name	MI	Last Name or PAC/Party Committee Name RI SOCIETY CPA PAC INC	Suffix	Employer Na	me		
	Address ARPE DRIVE-UNIT 5				Street Address	s		
City CRANS	STON		State Zip RI 02920		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/16/2021	Deposit Date	Con	ntribution Amount
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RI STATE ASSOCIATION OF FIREFIGHTERS	Suffix	Employer Na			
	Address MITH STREET				Street Address	s		
City NORTH	H PROVIDENCE		State Zip RI 02911		City		State	Zip
Item	Transaction Type Check		Contribution Type PAC		Receipt Date 06/18/2021	Deposit Date	Cor	atribution Amount 200.00
			In Kind/Other Receipts De	scription				
		Con	tributor Information			Employ	er Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name RIALA PAC (RI Assisted Living Association)	Suffix	Employer Na			
	Address ORTH BROADWAY				Street Address	s		
City EAST F	PROVIDENCE		State Zip RI 02914		City		State	Zip

Item	Transaction Type Check	Contribution Type PAC		eceipt Date Depo 04/08/2021	osit Date	Contribution Amount 1,000.00
		In Kind/Other Receipts D	escription			
		Contributor Information			Employer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name RIMTA PAC (RI Marine Trade Association)	Suffix	Employer Name	• •	
Street A	Address OADWAY			Street Address		
City NEWPO	ORT	State Zip RI 02840		City	Sta	te Zip
Item	Transaction Type Check	Contribution Type PAC		eceipt Date Depo	osit Date	Contribution Amoun
		In Kind/Other Receipts D				,
		Contributor Information			Employer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name RIOA PAC (RI Optometric Association)	Suffix	Employer Name	•	
Street A	Address EVEN SANTOS			Street Address		
City CUMBI	ERLAND	State Zip RI 02864		City	Sta	te Zip
Item	Transaction Type Check	Contribution Type PAC		eceipt Date Depo	osit Date	Contribution Amoun
		In Kind/Other Receipts D	escription			
		Contributor Information			Employer Data	
Prefix	First Name	MI Last Name or PAC/Party Committee Name UTILITY CONTRACTORS ASSOCIATION O	Suffix F RI	Employer Name	Zimproyer Zuna	
Street A	Address TTONHOLE DR			Street Address		
City PROVII	DENCE	State Zip RI 02909		City	Sta	te Zip
Item	Transaction Type Check	Contribution Type PAC		eceipt Date Depo	osit Date	Contribution Amoun
		In Kind/Other Receipts D				

	Contributor Information		Employer Data		
Prefix First Name	MI Last Name or PAC	Party Committee Name	Suffix	Employer Name	_
	WEST WARWICK	FIREFIGHTERS LOCAL 11	04		
Street Address				Street Address	
P O BOX 1311					
City		State Zip		City	State Zip
WEST WARWICK		RI 02893			

CF-3

SCHEDULE OF EXPENDITURES

Key#	Full Nan	ne of Candidate o	r Committee		Reportin	ng Period			
2,235	DANIEL	J MCKEE			From:	04/01/2021	To:	06/30/2	2021
Charle#	Ermanditum Data	Parimont Data	Dishuman and Toma	Erman dituna Toma			F	dituus As	
Check # DM	Expenditure Date 06/17/2021	Payment Date	Disbursement Type Campaign Expenditure	Expenditure Type Advertising			Expen	diture Aı	πουπτ \$522.90
			Campaign Expenditure	Advertising					\$322.90
Purpose of	Expenditure								
			Day	ee Information					
Prefix	First Name		MI	LastName or Vendor Name					Suffix
rienx	rii st ivaine		MI	Beacon Communications, Inc.					Sum
Street Add							N4-4-	7:	
1944 Warw				City Warwick			State U	Zip 02889	
1777 Walw.	ick Ave			Walwick		1	<u> </u>	02007	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type			Expen	diture Aı	nount
DM	06/17/2021	•	Campaign Expenditure	Bank Fees			•		\$82.42
Purpose of	Expenditure								
•	_								
			Pay	ee Information					
Prefix	First Name		MI	LastName or Vendor Name					Suffix
				Campaign Deputy					
Street Add	ress			City		S	State	Zip	
PO Box 814	41			Louisville		ŀ	ΚΥ	40257	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type			Expen	diture Aı	nount
DM	06/18/2021		Campaign Expenditure	Bank Fees					\$93.16
Purpose of	Expenditure								
			D.	T.O. 41					
D 6	T1 . 37		•	ee Information					C . CC
Prefix	First Name		MI	LastName or Vendor Name					Suffix
				Campaign Deputy		_			
Street Add				City			State	Zip	
PO Box 814	1 1			Louisville		ŀ	ζY	40257	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type			Evnen	diture Aı	nount
DM	06/16/2021	1 ayment Date	Campaign Expenditure	Bank Fees			Lapen	unture Ai	\$43.93
	Expenditure		Cumpuigh Expenditure	Dum 1 ccs					Ψ13.33
I ui puse ui	Lapenditure								
			Pay	ee Information					
Prefix	First Name		MI	LastName or Vendor Name					Suffix
				Campaign Deputy					
Street Add	ress			City		S	State	Zip	
PO Box 814				Louisville			ζY	40257	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type			Expen	diture Aı	
DM	06/09/2021		Campaign Expenditure	Bank Fees					\$50 50
Purpose of	Expenditure								
			_	T.0. (1					
_			•	ee Information					
Prefix	First Name		MI	LastName or Vendor Name					Suffix
				Campaign Deputy					
Street Add				City			State	Zip	
PO Box 814	41			Louisville		F	ζY	40257	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/10/2021	-	Campaign Expenditure	Bank Fees		\$33.50
Purpose of	Expenditure					
			_			
D 6	T1 . 37		•	Information		0.00
Prefix	First Name			LastName or Vendor Name Campaign Deputy		Suffix
C44 A J.J					C4-4-	7:
PO Box 814				City Louisville	State KY	Zip 40257
TO BOX OT				Douisvino	A1	10237
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/11/2021		Campaign Expenditure	Bank Fees		\$59.75
Purpose of	Expenditure					
			•	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addı				City	State	Zip
PO Box 814	1 1			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Eynon	diture Amount
DM	06/14/2021	Tayment Date	Campaign Expenditure	Bank Fees	Lapen	\$17.00
	Expenditure					******
a ar pase ar	2pez					
			Payee	Information		
Prefix	First Name		•	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addı	ress			City	State	Zip
PO Box 814	1 1			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/21/2021		Campaign Expenditure	Bank Fees		\$14.89
Purpose of	Expenditure					
			D	T.C. (1		
Duefir	First Name		•	Information		Suffir
Prefix	First Name		MI	LastName or Vendor Name		Suffix
			MI	LastName or Vendor Name Campaign Deputy	State	
Street Addı	ress		MI	LastName or Vendor Name Campaign Deputy City	State KY	Zip
	ress		MI	LastName or Vendor Name Campaign Deputy	State KY	
Street Addı	ress	Payment Date	MI	LastName or Vendor Name Campaign Deputy City	KY	Zip
Street Addi PO Box 814	ress H	Payment Date	MI	LastName or Vendor Name Campaign Deputy City Louisville	KY	Zip 40257
Street Addr PO Box 814 Check # DM	ress 11 Expenditure Date	Payment Date	MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY	Zip 40257 diture Amount
Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information	KY	Zip 40257 diture Amount \$18 00
Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name	KY	Zip 40257 diture Amount
Street Addn PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy	KY	Zip 40257 diture Amount \$18 00
Street Addr PO Box 814 Check # DM Purpose of Prefix	Expenditure Date 06/22/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip
Street Addn PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy	Ехреп	Zip 40257 diture Amount \$18 00
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814	Expenditure Date 06/22/2021 Expenditure First Name		MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check #	Expenditure Date 06/22/2021 Expenditure First Name ress	Payment Date Payment Date	MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021 Expenditure First Name ress 41 Expenditure Date 06/23/2021		MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021 Expenditure First Name ress		MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021 Expenditure First Name ress 41 Expenditure Date 06/23/2021		MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	Expenditure Date 06/22/2021 Expenditure First Name ress 41 Expenditure Date 06/23/2021		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021 Expenditure First Name ress 11 Expenditure Date 06/23/2021 Expenditure Date 06/23/2021		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount \$99.05
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021 Expenditure First Name ress 41 Expenditure Date 06/23/2021 Expenditure Date Trist Name		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name	KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount \$99.05
Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	Expenditure Date 06/22/2021 Expenditure First Name ress 41 Expenditure Date 06/23/2021 Expenditure Date 06/23/2021 Expenditure		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy	Expen State KY Expen	Zip 40257 diture Amount \$18 00 Suffix Zip 40257 diture Amount \$99.05

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/24/2021		Campaign Expenditure	Bank Fees		\$124.60
Purpose of	Expenditure					
			_			
			•	Information		
Prefix	First Name			LastName or Vendor Name		Suffix
				Campaign Deputy	-	
Street Addi				City	State	Zip
PO Box 814	¥1			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/25/2021	•	Campaign Expenditure	Bank Fees	•	\$98.20
Purpose of	Expenditure					
-	-					
			Payee	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addı	ress			City	State	Zip
PO Box 814	1 1			Louisville	KY	40257
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/28/2021		Campaign Expenditure	Bank Fees		\$5.45
Purpose of	Expenditure					
			Payee	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addı	ress			City	State	Zip
PO Box 814	41			Louisville	KY	40257
					_	
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	06/29/2021		Campaign Expenditure	Bank Fees		\$151.00
Purpose of	Expenditure					
			Th.	T. C		
			•	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
			MI			Suffix
Street Addı	ress		MI	LastName or Vendor Name Campaign Deputy City	State	Zip
Street Addı	ress		MI	LastName or Vendor Name Campaign Deputy	State KY	
Street Addi PO Box 814	ress ‡1	Payment Date	МІ	LastName or Vendor Name Campaign Deputy City Louisville	KY	Zip 40257
Street Addi PO Box 814 Check #	ress 41 Expenditure Date	Payment Date	MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY	Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM	Expenditure Date 06/30/2021	Payment Date	МІ	LastName or Vendor Name Campaign Deputy City Louisville	KY	Zip 40257
Street Addi PO Box 814 Check # DM	ress 41 Expenditure Date	Payment Date	MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY	Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM	Expenditure Date 06/30/2021	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/30/2021 Expenditure	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 diture Amount \$42 25
Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/30/2021	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name	KY	Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix	Expenditure Date 06/30/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy	KY	Zip 40257 diture Amount \$42 25
Street Addi PO Box 814 Check # DM Purpose of Prefix	Expenditure Date 06/30/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City	KY Expen	Zip 40257 diture Amount \$42 25 Suffix
Street Addi PO Box 814 Check # DM Purpose of Prefix	Expenditure Date 06/30/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy	KY	Zip 40257 diture Amount \$42 25
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814	Expenditure Date 06/30/2021 Expenditure First Name	Payment Date Payment Date	MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City	KY Expen	Zip 40257 diture Amount \$42 25 Suffix
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check #	Expenditure Date 06/30/2021 Expenditure First Name		MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check #	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date		MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check #	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021		MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check #	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021		MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021 Expenditure		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount \$67.00
Street Addi PO Box 814 Check # DM Purpose of Prefix Street Addi PO Box 814 Check # DM Purpose of	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021 Expenditure First Name		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	Expen State KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount \$67.00
Prefix Street Addi PO Box 814 Check # DM	Expenditure Date 06/30/2021 Expenditure First Name ress 41 Expenditure Date 04/01/2021 Expenditure First Name		Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expen	Zip 40257 diture Amount \$42 25 Suffix Zip 40257 diture Amount \$67.00

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	04/01/2021		Campaign Expenditure	Bank Fees		\$139.30
Purpose of	Expenditure					
			D.	T. 0		
D . C	E'm AN		•	ee Information		6-65-
Prefix	First Name		MI	LastName or Vendor Name Campaign Deputy		Suffix
Street Add	ress			City	State	Zip
PO Box 814	41			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	04/20/2021		Campaign Expenditure	Bank Fees		\$33.50
Purpose of	Expenditure					
			_			
D 6	T		-	ee Information		0.00
Prefix	First Name		MI	LastName or Vendor Name Campaign Deputy		Suffix
Street Add					State	7:
PO Box 814				City Louisville	State KY	Zip 40257
TO DOX 01-	71			Louisvinc	KI	40237
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	04/21/2021		Campaign Expenditure	Bank Fees		\$33.50
Purpose of	Expenditure					
			•	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy	_	
Street Add				City	State	Zip
PO Box 814	41			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
170	04/07/2021		Campaign Expenditure	Consultant & Professional Services		\$150.00
170	04/07/2021		101			
-	Expenditure					
-						
Purpose of	Expenditure		Pay	ee Information		
-				LastName or Vendor Name		Suffix
Purpose of Prefix	Expenditure First Name		Pay	LastName or Vendor Name Campaign Deputy	S	
Purpose of Prefix Street Add	Expenditure First Name		Pay	LastName or Vendor Name Campaign Deputy City	State	Zip
Purpose of Prefix	Expenditure First Name		Pay	LastName or Vendor Name Campaign Deputy	State KY	
Purpose of Prefix Street Add	Expenditure First Name ress 41 Expenditure Date	Payment Date	Pay MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY	Zip 40257 nditure Amount
Purpose of Prefix Street Addr PO Box 814	Expenditure First Name ress 41	Payment Date	Pay MI	LastName or Vendor Name Campaign Deputy City Louisville	KY	Zip 40257
Purpose of Prefix Street Add: PO Box 814 Check # DM	Expenditure First Name ress 41 Expenditure Date	Payment Date	Pay MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY	Zip 40257 nditure Amount
Purpose of Prefix Street Add: PO Box 814 Check # DM	First Name First Name ress 41 Expenditure Date 05/18/2021	Payment Date	Paya MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 nditure Amount
Purpose of Prefix Street Adda PO Box 814 Check # DM Purpose of	First Name First Name ress 41 Expenditure Date 05/18/2021 Expenditure	Payment Date	Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 Inditure Amount \$3 80
Purpose of Prefix Street Add: PO Box 814 Check # DM	First Name First Name ress 41 Expenditure Date 05/18/2021	Payment Date	Paya MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY	Zip 40257 nditure Amount
Purpose of Prefix Street Adda PO Box 814 Check # DM Purpose of	First Name First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name	Payment Date	Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name	KY	Zip 40257 Inditure Amount \$3 80
Purpose of Prefix Street Adda PO Box 814 Check # DM Purpose of	First Name First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name	Payment Date	Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy	KY Expe	Zip 40257 Inditure Amount \$3 80
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr	First Name First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name	Payment Date Payment Date	Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip
Purpose of Prefix Street Add: PO Box 814 Check # DM Purpose of Prefix Street Add: PO Box 814	First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name		Payo MI Disbursement Type Campaign Expenditure Payo MI	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure		Payo MI Disbursement Type Campaign Expenditure Payo MI Disbursement Type	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure First Name ress 41 Expenditure Date 05/27/2021		Paye MI Disbursement Type Campaign Expenditure Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name ress 41 Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure 2 Expenditure First Name ress 41 Expenditure Date 05/27/2021		Paye MI Disbursement Type Campaign Expenditure Paye MI Disbursement Type Campaign Expenditure Paye Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount \$33.50
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure First Name ress 41 Expenditure Date 05/27/2021		Paye MI Disbursement Type Campaign Expenditure Paye MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure First Name ress 41 Expenditure Date 05/27/2021 Expenditure First Name		Paye MI Disbursement Type Campaign Expenditure Paye MI Disbursement Type Campaign Expenditure Paye Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	Expe State KY Expe	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount \$33.50
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name Expenditure Date 05/18/2021 Expenditure First Name ress 41 Expenditure First Name ress 41 Expenditure Date 05/27/2021 Expenditure First Name		Paye MI Disbursement Type Campaign Expenditure Paye MI Disbursement Type Campaign Expenditure Paye Campaign Expenditure	LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees ee Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	KY Expe State KY	Zip 40257 Inditure Amount \$3 80 Suffix Zip 40257 Inditure Amount \$33.50

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	05/28/2021	I uyancar Dure	Campaign Expenditure	Bank Fees	Zape	\$33.50
Purpose of	Expenditure					
			•	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addr				City	State	Zip
PO Box 814	11			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	06/01/2021	·	Campaign Expenditure	Bank Fees	•	\$33.50
Purpose of	Expenditure					
			Payee	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Campaign Deputy		
Street Addr				City	State	Zip
PO Box 814	11			Louisville	KY	40257
CI I "	P	D	D' L	P " "		114
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
178	05/11/2021		Campaign Expenditure	Consultant & Professional Services		\$150.00
Purpose of	Expenditure					
			Pavee	Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
TICHA	TH St TVAILE			Campaign Deputy		Sulla
Street Addr	229			City	State	Zip
PO Box 814				Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
		-				
DM	06/02/2021		Campaign Expenditure	Bank Fees		\$17.00
DM Purpose of	06/02/2021 Expenditure		Campaign Expenditure	Bank Fees		\$17.00
						\$17.00
Purpose of	Expenditure		Payee	Information		
Purpose of				· Information LastName or Vendor Name		\$17.00 Suffix
Purpose of Prefix	Expenditure First Name		Payee	Information LastName or Vendor Name Campaign Deputy		Suffix
Purpose of Prefix Street Addr	Expenditure First Name		Payee	Information LastName or Vendor Name Campaign Deputy City	State	Suffix Zip
Purpose of Prefix Street Addr	Expenditure First Name		Payee	Information LastName or Vendor Name Campaign Deputy		Suffix
Purpose of Prefix Street Addr PO Box 814	Expenditure First Name ress	Payment Date	Payee MI	Information LastName or Vendor Name Campaign Deputy City Louisville	State KY	Suffix Zip 40257
Purpose of Prefix Street Addr PO Box 814 Check #	Expenditure First Name	Payment Date	Payee	Information LastName or Vendor Name Campaign Deputy City	State KY	Suffix Zip
Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name ress 11 Expenditure Date	Payment Date	Payee MI Disbursement Type	Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	State KY	Suffix Zip 40257 nditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name ress 11 Expenditure Date 06/03/2021	Payment Date	Payee MI Disbursement Type	Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	State KY	Suffix Zip 40257 nditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM	First Name ress 11 Expenditure Date 06/03/2021	Payment Date	Payee MI Disbursement Type Campaign Expenditure	Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	State KY	Suffix Zip 40257 nditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name ress 11 Expenditure Date 06/03/2021	Payment Date	Payee MI Disbursement Type Campaign Expenditure	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	State KY	Suffix Zip 40257 nditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name ress 11 Expenditure Date 06/03/2021 Expenditure	Payment Date	Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees	State KY	Suffix Zip 40257 Inditure Amount \$51 00
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of	First Name ress H Expenditure Date 06/03/2021 Expenditure First Name	Payment Date	Payee MI Disbursement Type Campaign Expenditure Payee MI	E Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees F Information LastName or Vendor Name	State KY	Suffix Zip 40257 Inditure Amount \$51 00
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr	First Name Expenditure Date 06/03/2021 Expenditure First Name	Payment Date	Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees EInformation LastName or Vendor Name Campaign Deputy	State KY Expe	Suffix Zip 40257 Inditure Amount \$51 00
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814	First Name Expenditure Date 06/03/2021 Expenditure First Name		Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees EInformation LastName or Vendor Name Campaign Deputy City Louisville	State KY Exper	Suffix Zip 40257 uditure Amount \$51 00 Suffix Zip 40257
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check #	First Name Expenditure Date 06/03/2021 Expenditure First Name ress	Payment Date Payment Date	Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check #	First Name Expenditure Date 06/03/2021 Expenditure First Name ress 11 Expenditure First Name ress 11 Expenditure Date 06/04/2021		Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees EInformation LastName or Vendor Name Campaign Deputy City Louisville	State KY Exper	Suffix Zip 40257 uditure Amount \$51 00 Suffix Zip 40257
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # 184	First Name Expenditure Date 06/03/2021 Expenditure First Name ress		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check #	First Name Expenditure Date 06/03/2021 Expenditure First Name ress 11 Expenditure First Name ress 11 Expenditure Date 06/04/2021		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Consultant & Professional Services	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # 184 Purpose of	First Name Expenditure Date 06/03/2021 Expenditure First Name Expenditure Expenditure Expenditure Date 06/04/2021 Expenditure Date 06/04/2021		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Consultant & Professional Services	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount \$150.00
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # 184 Purpose of	First Name Expenditure Date 06/03/2021 Expenditure First Name ress 11 Expenditure First Name ress 11 Expenditure Date 06/04/2021		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Consultant & Professional Services	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # 184 Purpose of	First Name Expenditure Date 06/03/2021 Expenditure First Name Expenditure Date 06/04/2021 Expenditure Date 06/04/2021 Expenditure		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Consultant & Professional Services Information LastName or Vendor Name Campaign Deputy	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount \$150.00
Purpose of Prefix Street Addr PO Box 814 Check # DM Purpose of Prefix Street Addr PO Box 814 Check # 184	First Name Expenditure Date 06/03/2021 Expenditure First Name Expenditure Date 06/04/2021 Expenditure Date 06/04/2021 Expenditure		Payee MI Disbursement Type Campaign Expenditure Payee MI Disbursement Type Campaign Expenditure Payee MI	EInformation LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Bank Fees Information LastName or Vendor Name Campaign Deputy City Louisville Expenditure Type Consultant & Professional Services	State KY Exper	Suffix Zip 40257 Inditure Amount \$51 00 Suffix Zip 40257 Inditure Amount \$150.00

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	06/04/2021	•	Campaign Expenditure	Bank Fees	•	\$17.00
Purpose of	Expenditure					
			Dan	Tr. 6		
DC	First Name		MI	ee Information		Suffix
Prefix	First Name		MI	LastName or Vendor Name Campaign Deputy		Sumx
Street Addı	ress			City	State	Zip
PO Box 814	41			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	06/07/2021		Campaign Expenditure	Bank Fees		\$0.67
Purpose of	Expenditure					
			Pay	ee Information		
Prefix	First Name		MI	LastName or Vendor Name Campaign Deputy		Suffix
Street Addı	ress			City	State	Zip
PO Box 814	4 1			Louisville	KY	40257
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
186	06/09/2021		Campaign Expenditure	Consultant & Professional Services		\$302.00
Purpose of	Expenditure					
102 - reimb.	for mileage 200 for co	onsultin				
			Pay	ee Information		
Prefix	First Name Daniel		MI	LastName or Vendor Name Costello		Suffix
Street Addı	ress			City	State	Zip
5 Brett Dr				Foster	RI	02825
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
195	06/23/2021		Campaign Expenditure	Fundraising Expenses		\$9,822.93
Purpose of	Expenditure					
			Pav	ee Information		
Prefix	First Name		MI	LastName or Vendor Name Crown Plaza Hotel		Suffix
Street Addı	race			City	State	Zip
801 Greenw				Warwick	RI	02886
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
177	05/11/2021		Campaign Expenditure	Consultant & Professional Services		\$1,000.00
Purpose of	Expenditure					
			Pav	ee Information		
Prefix	First Name		MI	LastName or Vendor Name Estrada Bookkeeping/Political Consulting		Suffix
Street Addı	race			City	State	Zip
Street Audi	Less			Providence	RI	02904
60 Christoph	her Street					
60 Christoph Check #	her Street Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
		Payment Date	Disbursement Type Campaign Expenditure	Expenditure Type Consultant & Professional Services	Expe	nditure Amount \$1,500 00
Check # 182	Expenditure Date	Payment Date	• •		Expe	
Check # 182	Expenditure Date 06/02/2021	Payment Date	Campaign Expenditure	Consultant & Professional Services	Expe	
Check # 182 Purpose of	Expenditure Date 06/02/2021 Expenditure	Payment Date	Campaign Expenditure Pay	Consultant & Professional Services ee Information	Expe	\$1,500 00
Check # 182	Expenditure Date 06/02/2021	Payment Date	Campaign Expenditure	Consultant & Professional Services	Expe	
Check # 182 Purpose of	Expenditure Date 06/02/2021 Expenditure First Name	Payment Date	Campaign Expenditure Pay	Consultant & Professional Services ee Information LastName or Vendor Name	Expe	\$1,500 00

Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
175	05/11/2021		Campaign Expenditure	Consultant & Professional Services		\$750.00
Purpose of	Expenditure					
			Pave	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
1 Tenx	That Name		WII	Galvin & Associates		Sum
Street Add	ress			City	State	Zip
One Park R	ow, 5th Floor			Providence	RI	02903
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
167	04/01/2021		Campaign Expenditure	Consultant & Professional Services		\$750.00
Purpose of	Expenditure					
			_			
			•	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
o				Galvin & Associates	Q	~ :
Street Add				City	State	Zip
One Park K	ow, 5th Floor			Providence	RI	02903
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
185	06/09/2021		Campaign Expenditure	Consultant & Professional Services		\$3,000.00
Purpose of	Expenditure					
			_			
n «	771 . 37		•	ee Information		~ ~
Prefix	First Name		MI	LastName or Vendor Name		Suffix
C	Rachel			Goldstein	C	7.
Street Add				City	State	Zip
32 Parker S	treet, #3			Boston	MA	02126
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
194	06/23/2021		Campaign Expenditure	Consultant & Professional Services		\$3,000.00
Purpose of	Expenditure					
			D	I		
DC	Einst Name		•	ee Information		ete
Prefix	First Name Rachel		MI	LastName or Vendor Name Goldstein		Suffix
Street Add					State	7 in
32 Parker S				City Boston	MA	Zip 02126
JZ Turker 5	ucci, no			Doston	14111	02120
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	05/22/2021		Campaign Expenditure	Fundraising Expenses		\$1,220 16
Purpose of	Expenditure					
			Dow	o Information		
Profix	First Name		•	ee Information		Suffix
Prefix	First Name		Payo MI	LastName or Vendor Name		Suffix
			•	LastName or Vendor Name Iron Works Tavern	State	
Prefix Street Adds	ress		•	LastName or Vendor Name	State RI	Suffix Zip 02886
Street Add	ress		•	LastName or Vendor Name Iron Works Tavern City	State RI	Zip
Street Addi 697 Jefferso Check #	ress on Blvd Expenditure Date	Payment Date	MI Disbursement Type	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type	RI	Zip 02886 nditure Amount
Street Adda 697 Jefferso Check # 180	ress on Blvd Expenditure Date 05/27/2021	Payment Date	МІ	LastName or Vendor Name Iron Works Tavern City Warwick	RI	Zip 02886
Street Adda 697 Jefferso Check # 180	ress on Blvd Expenditure Date	Payment Date	MI Disbursement Type	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type	RI	Zip 02886 nditure Amount
Street Adda 697 Jefferso Check # 180	ress on Blvd Expenditure Date 05/27/2021	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type Fundraising Expenses	RI	Zip 02886 nditure Amount
Street Addr 697 Jefferso Check # 180 Purpose of	eress on Blvd Expenditure Date 05/27/2021 Expenditure	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type Fundraising Expenses	RI	Zip 02886 nditure Amount \$3,244.32
Street Adda 697 Jefferso Check # 180	ress on Blvd Expenditure Date 05/27/2021	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type Fundraising Expenses	RI	Zip 02886 nditure Amount
Street Addr 697 Jefferso Check # 180 Purpose of	Expenditure Date 05/27/2021 Expenditure First Name	Payment Date	MI Disbursement Type Campaign Expenditure	LastName or Vendor Name Iron Works Tavern City Warwick Expenditure Type Fundraising Expenses ee Information LastName or Vendor Name	RI	Zip 02886 nditure Amount \$3,244.32

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
193	06/23/2021		Campaign Expenditure	Fundraising Expenses		\$3,413.34
Purpose of	Expenditure					
			D	- T		
Prefix	First Name		MI	ee Information LastName or Vendor Name		Suffix
Frenx	First Name		MI	Mare Rooftop		Sumx
Street Addı	ress			City	State	Zip
229 Waterm	an Street			Providence	RI	02906
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
189	06/09/2021		Campaign Expenditure	Donations (Political)		\$1,000.00
Purpose of	Expenditure					
			D	- T- C		
Prefix	First Name		MI	ee Information LastName or Vendor Name		Suffix
Frenx	First Name		MI	Mount Hope Neighborhood Association		Sumx
Street Addı	2000			City	State	Zip
	nth RI 199 Camp Street			Providence	RI	02906
	an ru 133 camp succe			110100000		
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
DM	06/07/2021		Campaign Expenditure	Bank Fees		\$15.00
Purpose of	Expenditure					
			D	7.0		
D 6	T7 . 37		•	ee Information		0.00
Prefix	First Name		MI	LastName or Vendor Name Navigant Credit Union		Suffix
Street Addı	2000			City	State	7in
1005 Dougl				Smithfield	RI	Zip 02917
1005 Dough	us I Me			Similaries		02517
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
DM	04/12/2021		Campaign Expenditure	Bank Fees		\$15.00
Purpose of	Expenditure					
			_			
n c	T" () T		•	ee Information		C . C
Prefix	First Name		MI	LastName or Vendor Name Navigant Credit Union		Suffix
C44 A J.J.					64-4-	7:
Street Adda 1005 Dougl				City Smithfield	State RI	Zip 02917
1005 Dough	us I Inc			Similaricit		02517
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
DM	04/13/2021		Campaign Expenditure	Bank Fees		\$15 00
Purpose of	Expenditure					
			D	T		
DC	F:4 N		MI	ee Information		Suffix
Prefix	First Name		MII	LastName or Vendor Name Navigant Credit Union		Sumx
Street Addr	ress			City	State	Zip
1005 Dougl	as Pike			Smithfield	RI	02917
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expend	liture Amount
DM	05/07/2021	1 nyment Dute	Campaign Expenditure	Bank Fees	Lapen	\$33.50
Purpose of	Expenditure					
Purpose of	Expenditure					
Purpose of	Expenditure		Pay	ee Information		
Purpose of Prefix	Expenditure First Name		Payo MI	LastName or Vendor Name		Suffix
	•		•			Suffix
	First Name		•	LastName or Vendor Name	State RI	Suffix Zip 02917

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
DM	05/10/2021		Campaign Expenditure	Bank Fees		\$12.00
Purpose of	Expenditure					
			Pave	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	21100211111110			Navigant Credit Union		
Street Addr	ess			City	State	Zip
1005 Dougla	as Pike			Smithfield	RI	02917
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
169	04/07/2021		Campaign Expenditure	Advertising		\$300.00
Purpose of	Expenditure					
				7.0		
	T11 . 37			ee Information		0.00
Prefix	First Name		MI	LastName or Vendor Name Portuguese Times		Suffix
Street Addr	ess			City	State	Zip
	net Avenue PO Box 612	88		New Bedford	MA	02746
Chaol: #	Fynanditus D-t	Payment Date	Dishursamant T	F-manditum T	F	diture America
Check# 183	Expenditure Date 06/04/2021	Payment Date	Disbursement Type Campaign Expenditure	Expenditure Type Fundraising Expenses	Expen	diture Amount \$990.00
			Campaign Expenditure	r undraising Expenses		\$990.00
_	Expenditure fundraiser mailing					
postage for	iunuraisei mannig		Dove	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
rrenx	First Name		MI	Postmaster		Sumx
Street Addr	ess			City	State	Zip
2055 Diamo	ond Hill Road			Cumberland	RI	02864
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
205	06/30/2021		Campaign Expenditure	Fundraising Expenses		\$275.00
Purpose of	Expenditure					
oostage for	thank you's					
			Paye	ee Information		
Prefix	First Name		MI	LastName or Vendor Name Postmaster		Suffix
Street Addr	2000			City	State	Zip
	ond Hill Road			Cumberland	RI	02864
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
188	06/09/2021		Campaign Expenditure	Fundraising Expenses		\$1,471.25
Purpose of	Expenditure					
			n	on Information		
Prefix	First Name		MI	ee Information LastName or Vendor Name		Suffix
rrenx	First Name		MI	Regine Printing		Sumx
Street Addr	ress			City	State	Zip
208 Laurel I	Hill Ave			Providence	RI	02909
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
181	05/27/2021		Campaign Expenditure	Fundraising Expenses		\$345.77
Purnose of	Expenditure					
ur pose or						
i urpose or			n.	a Information		
			•	ee Information		~ ~~
Prefix	First Name		Paye MI	ee Information LastName or Vendor Name Regine Printing		Suffix
			•	LastName or Vendor Name	State	Suffix Zip

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
191	06/17/2021		Campaign Expenditure	Consultant & Professional Services		\$4,000.0
Purpose of blast emails	Expenditure					
olasi eman	S		D	I		
	T7' (N)		•	ree Information		0.55
Prefix	First Name		MI	LastName or Vendor Name		Suffix
~				Rising Tide Interactive, LLC	~	
Street Add				City	State	Zip
1250 H Str	eet, NW, Suite 200			Washington	DC	20005
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
179	05/11/2021		Campaign Expenditure	Office Equipment & Supplies		\$160.3
Purpose of	Expenditure					
reimburse f	-					
			Pay	ee Information		
Prefix	First Name		мі	LastName or Vendor Name		Suffix
	Jerry		A.	Sahagian		
Street Add	-			City	State	Zip
9 Wyndclif				Saunderstown	RI	02874
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
168	04/07/2021		Campaign Expenditure	Food, Beverages and Meals		\$166.08
Purpose of	Expenditure					
reimb. for 1	meal - campaign meeting	g at LaForge Casin	o Restaurant			
			Pay	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Anthony			Silva		
Street Add	ress			City	State	Zip
10 Teal Por	nd Road			Narragansett	RI	02882
				-		
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
190	06/09/2021		Campaign Expenditure	Food, Beverages and Meals		\$103.68
Purpose of	Expenditure					
reimb. for 1	meals Brewed Awakenin	gs 13.83; West Sid	e Diner 89.85 - both DGA n	meetings		
			Pay	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Anthony			Silva		
				City	State	Zip
Street Add	ress					
				Narragansett	RI	02882
				-		
10 Teal Por		Payment Date	Disbursement Type	-	RI	
Street Add 10 Teal Por Check # 192	nd Road	Payment Date	Disbursement Type Campaign Expenditure	Narragansett	RI	02882
10 Teal Por Check # 192	nd Road Expenditure Date	Payment Date	• •	Narragansett Expenditure Type	RI	02882 nditure Amount
10 Teal Por Check # 192 Purpose of	Expenditure Date 06/23/2021	•	• •	Narragansett Expenditure Type	RI	02882 nditure Amount
10 Teal Por Check # 192 Purpose of	Expenditure Date 06/23/2021	•	Campaign Expenditure	Narragansett Expenditure Type	RI	02882 nditure Amount
10 Teal Por Check # 192 Purpose of reimburse f	Expenditure Date 06/23/2021	•	Campaign Expenditure	Narragansett Expenditure Type Food, Beverages and Meals	RI	02882 nditure Amount
Check # 192 Purpose of reimburse f	Expenditure Date 06/23/2021 FExpenditure for meals: Coastguard H	•	Campaign Expenditure Pay	Narragansett Expenditure Type Food, Beverages and Meals ree Information	RI	02882 nditure Amount \$466.39
10 Teal Por Check # 192 Purpose of reimburse f	Expenditure Date 06/23/2021 FEXPENDITURE For meals: Coastguard Horizontal Name Anthony	•	Campaign Expenditure Pay	Narragansett Expenditure Type Food, Beverages and Meals ree Information LastName or Vendor Name Silva	RI	02882 nditure Amount \$466.39
10 Teal Por Check # 192 Purpose of reimburse f	Expenditure Date 06/23/2021 FExpenditure for meals: Coastguard Horizontal Name Anthony	•	Campaign Expenditure Pay	Expenditure Type Food, Beverages and Meals ree Information LastName or Vendor Name Silva City	RI Expe	02882 nditure Amount \$466.39
10 Teal Por Check # 192 Purpose of reimburse f	Expenditure Date 06/23/2021 FExpenditure for meals: Coastguard Horizontal Name Anthony	•	Campaign Expenditure Pay	Narragansett Expenditure Type Food, Beverages and Meals ree Information LastName or Vendor Name Silva	RI Expe	02882 nditure Amount \$466.39 Suffix Zip
10 Teal Por Check # 192 Purpose of	Expenditure Date 06/23/2021 FExpenditure for meals: Coastguard Horizontal Name Anthony	•	Campaign Expenditure Pay	Expenditure Type Food, Beverages and Meals ree Information LastName or Vendor Name Silva City	RI Expe State RI	02882 nditure Amount \$466.39 Suffix Zip

Purpose of Expenditure

web videos

			-	ree Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				SKDKnickerbocker, LLC	.	7 .
Street Add 1150 18th S	ress Street, NW Suite 800			City Washington	State DC	Zip 20036
100 1011	Succe, Tr W State 505			Washington		20030
Check # OM	Expenditure Date 06/21/2021	Payment Date	Disbursement Type Campaign Expenditure	Expenditure Type Bank Fees	Expe	nditure Amount \$231.1
Purpose of	Expenditure					
			Pay	ree Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Square Space		
Street Add	ress			City	State	Zip
225 Varrick	t St, 12 Floor			New York	NY	10014
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
197	06/29/2021		Campaign Expenditure	Advertising		\$600.0
Purpose of	f Expenditure					
			Pay	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				The Portuguese Times		
Street Add	ress			City	State	Zip
1501 Acush	nnet Ave			New Bedford	MA	02746
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
OM	06/16/2021		Campaign Expenditure	Advertising		\$912.0
Purpose of	f Expenditure					
			Pay	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				The Providence Journal		
Street Add	ress			City	State	Zip
75 Fountain	n Street			Providence	RI	02902
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
DM	06/16/2021		Campaign Expenditure	Advertising		\$425.0
Purpose of	f Expenditure					
			Pay	ree Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				The Valley Breeze		
Street Add	ress			City	State	Zip
Blackstor	ne Valley Place			Lincoln	RI	02865
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expe	nditure Amount
102	05/13/2021		Campaign Expenditure	Office Equipment & Supplies		\$166 (
	Expenditure					
mieage ren	mbursement		Day	ree Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
TOHA	Michael		F	Trainor		Sum
Street Add			-	City	State	Zip
240 Gibbs A				Newport	RI	02840
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Fra	nditure Amount
196	06/29/2021	т аушені Баіе	Campaign Expenditure	Fundraising Expenses	Expe	\$1,883 2
	00/27/2021		Campaign Expenditure	r mioraising Expenses		φ1,003 2

Purpose of Expenditure

			Pavo	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
				Trattoria-Romana Restaurant		
Street Addı	220			City	State	Zip
	oin Road, #1			Lincoln	RI	02865
	,					
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
174	05/03/2021		Refund of Contribution	Other		\$1,000.0
	Expenditure ver limit contribution					
eruna or ov	er mmt contribution		Davis	ee Information		
	E' AN		-			e. ec.
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	George		A.	Economou		
Street Addı	ress			City	State	Zip
11 Mary An	n Dr			Cranston	RI	02921
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
172	05/01/2021		Refund of Contribution	Other	Zapen	\$1,000.0
			Tarana or Continuation	- Calci		Ψ1,000.0
	Expenditure					
refund of ov	er limit contribution					
			Paye	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Donald			Law		
Street Addı				City	State	Zip
7 Wilsondal				Dover	MA	02030
/ Wilsondai	e Sireet			Dover	MA	02030
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
173	05/03/2021		Refund of Contribution	Other		\$1,000.0
_	Expenditure					
refund of ov	ver limit contribution		D.	T. 0		
	T1 . 37		•	ee Information		c. c.
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Patrick		C.	Lynch		
Street Addı	ress			City	State	Zip
325 Rumsti	ck Rd			Barrington	RI	02806
Check#	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Fynan	diture Amount
176	05/11/2021	1 ayment Date	Refund of Contribution	Other	Едрен	\$500.0
	Expenditure					******
efund of co	-					
			Paye	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Gerald		P.	Zarrella		Jr.
Street Addı				City	State	Zip
PO Box 150				East Greenwich	RI	02818
FO BOX 150	70			East Greenwich	KI	02818
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expen	diture Amount
176	05/11/2021		Refund of Contribution	Other		\$1,000.0
Purpose of	Expenditure					
efund of co	ontribution					
			Paye	ee Information		
Prefix	First Name		MI	LastName or Vendor Name		Suffix
	Gerald		P.	Zarrella		Jr.
Street Addı	ress			City	State	Zip
PO Box 150				East Greenwich	RI	02818
O DOX 130	70			East Olecilwich	I/I	02010

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