

FEC FORM 3P **REPORT OF RECEIPTS AND DISBURSEMENTS**
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print) Example: If typing, type over the lines. 12FE4M5

Chafee 2016

ADDRESS (number and street) 1800 Post Road

Unit 17B

Check if different than previously reported. (ACC)

Warwick RI 02886

CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00579706 3. THIS REPORT IS FOR Primary X or General

4. TYPE OF REPORT (Choose One) Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1) October 15 (Q3)
- July 15 (Q2) January 31 Year-End Report (YE)
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

Thirtieth day report following the General Election

on M M / D D / Y Y Y Y Y Y

Twelfth day report preceding election

on M M / D D / Y Y Y Y Y Y in the State of

Is this Report an Amendment? yes no

5. Covering Period 01 / 09 / 2015 through 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Jerauld Charles Adams

Signature of Treasurer Mr. Jerauld Charles Adams [Electronically Filed] Date 07 / 09 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only							
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Write or Type Committee Name

Chafee 2016

Report Covering the Period: From: 01 / 09 / 2015 To: 06 / 30 / 2015

SUMMARY

Table with 2 columns: Description and Amount. Rows include: 6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD (0.00), 7. TOTAL RECEIPTS THIS PERIOD (392743.17), 8. SUBTOTAL (392743.17), 9. TOTAL DISBURSEMENTS THIS PERIOD (63757.48), 10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (328985.69), 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (0.00), 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (363694.14), 13. EXPENDITURES SUBJECT TO LIMITATION (0.00).

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

Table with 2 columns: Description and Amount. Rows include: 14. NET CONTRIBUTIONS (Other than Loans) (29049.03), 15. NET OPERATING EXPENDITURES (63653.79).

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

Chafee 2016

Report Covering the Period: From:

MM / DD / YYYY
01 / 09 / 2015

To:

MM / DD / YYYY
06 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	15090.00	15090.00
(ii) unitemized	13297.00	13297.00
(iii) Total contributions	28387.00	28387.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	662.03	662.03
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	29049.03	29049.03
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	363694.14	363694.14
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	363694.14	363694.14
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	0.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	0.00
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	392743.17	392743.17

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

Chafee 2016

Report Covering the Period: From:

MM / DD / YYYY
01 / 09 / 2015

To:

MM / DD / YYYY
06 / 30 / 2015

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	63653.79	63653.79
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	103.69	103.69
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	0.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	63757.48	63757.48

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00579706

Chafee 2016

ADDRESS (number and street) 1800 Post Road
Unit 17B
Warwick RI 02886
CITY STATE ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Mark Aalyson

Mailing Address 837 S Wall St

City	State	Zip Code
Columbus	OH	43206-1921

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
The Columbus Athenaeum	Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS1602

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial)
Jerauld Adams

Mailing Address 41 Arlington Ave

City	State	Zip Code
Providence	RI	02906-3209

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
North American Industries, Inc.	real estate

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS1922

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			25			2015			

Amount of Each Receipt this Period

<input type="text" value="270.00"/>

C. Full Name (Last, First, Middle Initial)
Jerauld Adams

Mailing Address 41 Arlington Ave

City	State	Zip Code
Providence	RI	02906-3209

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
North American Industries, inc.	Real Estate Management

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS14R6

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

Amount of Each Receipt this Period

<input type="text" value="270.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Jerauld Adams

Mailing Address 41 Arlington Ave

City	State	Zip Code
Providence	RI	02906-3209

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
North American Industries, inc.	Real Estate Management

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1170.00

Transaction ID : VR05BAS1G69

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

Amount of Each Receipt this Period
900.00

* In-Kind: donated two computers with office 7.0

B. Full Name (Last, First, Middle Initial)
Andrew Bridges

Mailing Address 115 Sheridan Way

City	State	Zip Code
Woodside	CA	94062-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Fenwick & West LLP	Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : VR05BAS14J9

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dick Chafee

Mailing Address 12 Humboldt Ave

City	State	Zip Code
Providence	RI	02906-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
n/a	retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : VR05BAS19E9

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1400.00

Total This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17A

Transaction ID : VR05BAS1G69

Computers for the campaign office

Form/Schedule:

Transaction ID:

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Inge Chafee

Mailing Address 12 Humboldt Ave

City State Zip Code
Providence RI 02906-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : VR05BAS19F7

Date of Receipt

M M / D D / Y Y Y Y
04 / 09 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Tom Chamberlin

Mailing Address 54 Newfields Rd

City State Zip Code
Exeter NH 03833-4542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : VR05BAS19H3

Date of Receipt

M M / D D / Y Y Y Y
04 / 12 / 2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Jacob Clemen

Mailing Address 50 Lower College Rd

City State Zip Code
Kingston RI 02881-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of RI University Staff / Student Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : VR05BAS13Y1

Date of Receipt

M M / D D / Y Y Y Y
05 / 02 / 2015

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
James Dye

Mailing Address 380 10th St

City State Zip Code
San Francisco CA 94103-3888

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
none retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : VR05BAS14W8

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Anita Flax

Mailing Address 40 Glen Ave

City State Zip Code
Cranston RI 02905-3702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State of RI Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : VR05BAS1033

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
William Fleming

Mailing Address 10 Gingerbread Ln

City State Zip Code
East Hampton NY 11937-2422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self employed attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : VR05BAS1A41

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Chris Gahagan

Mailing Address 7507 NE 75th Ct

City	State	Zip Code
Kansas City	MO	64158-1063

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
McGonagle Spencer Gahagan P.C.	Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS1533

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
Michael Imber

Mailing Address 6 Glenwood Rd

City	State	Zip Code
Weston	CT	06883-2322

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Alvarez & Marsal Public Sector Service	Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS1314

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
Ethan Kapstein

Mailing Address 24 Foulet Dr

City	State	Zip Code
Princeton	NJ	08540-7638

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AZ state university	professor

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : VR05BAS11C5

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
04			10			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
John Koza

Mailing Address PO Box 1441

City State Zip Code
Los Altos CA 94023-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
National Popular Vote, Inc. Information Requested

Receipt For: Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **2700.00**

Transaction ID : VR05BAS19G5

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Jaime Longhi

Mailing Address 75 Todd Hill Rd

City State Zip Code
West Cornwall CT 06796-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
22/7 Pictures, Inc. video documentary prod/director

Receipt For: Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

Transaction ID : VR05BAS11H5

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GA Nassikas

Mailing Address 6115 Ramshorn Pl

City State Zip Code
McLean VA 22101-2421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self artist

Receipt For: Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **1000.00**

Transaction ID : VR05BAS1184

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **3950.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
John S. O'Shea

Mailing Address 576 Pelham Rd NE

City	State	Zip Code
Atlanta	GA	30324-5105

FEC ID number of contributing federal political committee.

Name of Employer Self	Occupation Pediatrician/Child Advocate
--------------------------	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>
---	---

Transaction ID : VR05BAS13W5

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Jonathan Rudenberg

Mailing Address 503 Paisley Pl

City	State	Zip Code
Newark	DE	19711-3453

FEC ID number of contributing federal political committee.

Name of Employer Prime Directive, Inc.	Occupation Software Developer
---	----------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>
---	---

Transaction ID : VR05BAS16E3

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Daniel Siders

Mailing Address 503 Paisley Pl

City	State	Zip Code
Newark	DE	19711-3453

FEC ID number of contributing federal political committee.

Name of Employer Prime Directive, Inc	Occupation CEO
--	-------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>
---	---

Transaction ID : VR05BAS16D5

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 46

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Dorothy Stevens

Mailing Address 144 Elmdale Rd

City	State	Zip Code
North Scituate	RI	02857-1309

FEC ID number of contributing federal political committee.

Name of Employer: n/a Occupation: retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1750.00

Transaction ID : VR05BAS19V2

Date of Receipt

/ /

Amount of Each Receipt this Period

1750.00

B. Full Name (Last, First, Middle Initial)
Dorothy Stevens

Mailing Address 144 Elmdale Rd

City	State	Zip Code
North Scituate	RI	02857-1309

FEC ID number of contributing federal political committee.

Name of Employer: n/a Occupation: retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Transaction ID : VR05BAS1A91

Date of Receipt

/ /

Amount of Each Receipt this Period

950.00

C. Full Name (Last, First, Middle Initial)
Adelaide Trafton

Mailing Address 330 Pleasant Point Rd

City	State	Zip Code
Topsham	ME	04086-5324

FEC ID number of contributing federal political committee.

Name of Employer: n/a Occupation: homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : VR05BAS19W8

Date of Receipt

/ /

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶

3700.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)

Unitemized total

Mailing Address n/a

City	State	Zip Code
n/a	DC	00000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
13297.00

Transaction ID : AAAAAA1

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

13297.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ 13297.00

Total This Period (last page this line number only).....▶ 28387.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City State Zip Code
Warwick RI 02887-7328

FEC ID number of contributing federal political committee. **C** P60008075

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
47.97

Transaction ID : VR05BAS1F69

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2015

Amount of Each Receipt this Period
47.97

* In-Kind: Exxon Fuel purchase

B. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City State Zip Code
Warwick RI 02887-7328

FEC ID number of contributing federal political committee. **C** P60008075

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
87.58

Transaction ID : VR05BAS1F77

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2015

Amount of Each Receipt this Period
39.61

* In-Kind: 1374-B Fuel purchase

C. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City State Zip Code
Warwick RI 02887-7328

FEC ID number of contributing federal political committee. **C** P60008075

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
158.91

Transaction ID : VR05BAS1F93

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2015

Amount of Each Receipt this Period
36.41

* In-Kind: Sunoco fuel purchase

Subtotal Of Receipts This Page (optional).....▶ 123.99

Total This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1F69

Travel Expense

Form/Schedule: SA17D

Transaction ID: VR05BAS1F77

Travel Expense

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1F93

Travel Expense

Form/Schedule:

Transaction ID:

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address **PO Box 7328**

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. **C P60008075**

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
158.91

Transaction ID : VR05BAS1FA1

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	5

Amount of Each Receipt this Period
34.92

* In-Kind: Exxon fuel purchase

B. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address **PO Box 7328**

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. **C P60008075**

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
370.07

Transaction ID : VR05BAS1FD4

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	5

Amount of Each Receipt this Period
160.77

* In-Kind: Double tree Hotel room stay

C. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address **PO Box 7328**

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. **C P60008075**

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
370.07

Transaction ID : VR05BAS1FF0

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	5

Amount of Each Receipt this Period
50.39

* In-Kind: Exxon fuel purchase

Subtotal Of Receipts This Page (optional).....▶ **246.08**

Total This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1FA1

Travel Expense

Form/Schedule: SA17D

Transaction ID: VR05BAS1FD4

travel expense

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1FF0

travel expense

Form/Schedule:

Transaction ID:

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. C P60008075

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
395.07

Transaction ID : VR05BAS1FJ4

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2015

Amount of Each Receipt this Period
25.00

* In-Kind: Facebook fee

B. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. C P60008075

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
484.26

Transaction ID : VR05BAS1FM0

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Amount of Each Receipt this Period
39.19

* In-Kind: Xtra fuel purchase

C. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City	State	Zip Code
Warwick	RI	02887-7328

FEC ID number of contributing federal political committee. C P60008075

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
484.26

Transaction ID : VR05BAS1FQ3

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Amount of Each Receipt this Period
50.00

* In-Kind: Facebook fee

Subtotal Of Receipts This Page (optional).....▶ 114.19

Total This Period (last page this line number only).....▶ 114.19

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1FM0

travel expense

Form/Schedule:

Transaction ID:

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chafee 2016

A. Full Name (Last, First, Middle Initial)

Lincoln Chafee

Mailing Address PO Box 7328

City: Warwick State: RI Zip Code: 02887-7328

FEC ID number of contributing federal political committee: **C** P60008075

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 485.65

Transaction ID : VR05BAS1FS9

Date of Receipt

M M / D D / Y Y Y Y
 05 / 31 / 2015

Amount of Each Receipt this Period
 1.39

* In-Kind: Facebook fee

B. Full Name (Last, First, Middle Initial)

Lincoln Chafee

Mailing Address PO Box 7328

City: Warwick State: RI Zip Code: 02887-7328

FEC ID number of contributing federal political committee: **C** P60008075

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 540.34

Transaction ID : VR05BAS1FT7

Date of Receipt

M M / D D / Y Y Y Y
 06 / 03 / 2015

Amount of Each Receipt this Period
 54.69

* In-Kind: Exxon fuel purchase

C. Full Name (Last, First, Middle Initial)

Lincoln Chafee

Mailing Address PO Box 7328

City: Warwick State: RI Zip Code: 02887-7328

FEC ID number of contributing federal political committee: **C** P60008075

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 579.03

Transaction ID : VR05BAS1FW3

Date of Receipt

M M / D D / Y Y Y Y
 06 / 04 / 2015

Amount of Each Receipt this Period
 38.69

* In-Kind: Harris fuel purchase

Subtotal Of Receipts This Page (optional).....▶ 94.77

Total This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1FT7

travel expense

Form/Schedule: SA17D

Transaction ID: VR05BAS1FW3

travel expense

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Chafee 2016

A. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City State Zip Code
Warwick RI 02887-7328

FEC ID number of contributing federal political committee. **C** P60008075

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
644.03

Transaction ID : VR05BAS1FZ6

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

Amount of Each Receipt this Period
65.00

* In-Kind: Metro-North TVM & TQPS New York

B. Full Name (Last, First, Middle Initial)
Lincoln Chafee

Mailing Address PO Box 7328

City State Zip Code
Warwick RI 02887-7328

FEC ID number of contributing federal political committee. **C** P60008075

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
662.03

Transaction ID : VR05BAS1G20

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

Amount of Each Receipt this Period
18.00

* In-Kind: Union Station Parking

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ 83.00

Total This Period (last page this line number only).....▶ 662.03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17D

Transaction ID : VR05BAS1FZ6

Travel expense

Form/Schedule: SA17D

Transaction ID: VR05BAS1G20

Travel expense

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Jerauld Adams		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 41 Arlington Ave		Transaction ID : VR05BAS1G69I
City Providence	State RI	
Purpose of Disbursement donated two computers with office 7.0		Amount of Each Disbursement this Period 900.00
Candidate Name		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Kenny Alston		Date of Disbursement MM / DD / YYYY 05 / 12 / 2015
Mailing Address 304 Pearl St Unit 103		Transaction ID : VQZ639PZJM6
City Providence	State RI	
Purpose of Disbursement Campaign Consulting		Amount of Each Disbursement this Period 2000.00
Candidate Name		Campaign Consulting fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address PO Box 7328		Transaction ID : VQZ639PZJW9
City Warwick	State RI	
Purpose of Disbursement Reimburse for Figmints website design		Amount of Each Disbursement this Period 5240.00
Candidate Name Lincoln Chafee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 8140.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 04 / 23 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1F69I
City Warwick	State RI	
Purpose of Disbursement Exxon Fuel purchase		Amount of Each Disbursement this Period 47.97
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 04 / 24 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1F77I
City Warwick	State RI	
Purpose of Disbursement 1374-B Fuel purchase		Amount of Each Disbursement this Period 39.61
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 04 / 25 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1F93I
City Warwick	State RI	
Purpose of Disbursement Sunoco fuel purchase		Amount of Each Disbursement this Period 36.41
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 123.99

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 04 / 25 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FA11
City Warwick	State RI	
Purpose of Disbursement Exxon fuel purchase		Amount of Each Disbursement this Period 34.92
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 02 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FD41
City Warwick	State RI	
Purpose of Disbursement Double tree Hotel room stay		Amount of Each Disbursement this Period 160.77
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 02 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FF01
City Warwick	State RI	
Purpose of Disbursement Exxon fuel purchase		Amount of Each Disbursement this Period 50.39
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 246.08

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FJ4I
City Warwick	State RI	
Purpose of Disbursement Facebook fee		Amount of Each Disbursement this Period \$ 25.00
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FM0I
City Warwick	State RI	
Purpose of Disbursement Xtra fuel purchase		Amount of Each Disbursement this Period \$ 39.19
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FQ3I
City Warwick	State RI	
Purpose of Disbursement Facebook fee		Amount of Each Disbursement this Period \$ 50.00
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... **114.19**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 46

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chafee 2016

Full Name (Last, First, Middle Initial) A. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 05 / 31 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FS9I
City Warwick	State RI	
Purpose of Disbursement Facebook fee		Amount of Each Disbursement this Period 1.39
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 06 / 03 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FT7I
City Warwick	State RI	
Purpose of Disbursement Exxon fuel purchase		Amount of Each Disbursement this Period 54.69
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FW3I
City Warwick	State RI	
Purpose of Disbursement Harris fuel purchase		Amount of Each Disbursement this Period 38.69
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 94.77

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 46

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1FZ6I
City Warwick	State RI	
Purpose of Disbursement Metro-North TVM & TQPS New York		Amount of Each Disbursement this Period 65.00
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Lincoln Chafee		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address PO Box 7328		Transaction ID : VR05BAS1G20I
City Warwick	State RI	
Purpose of Disbursement Union Station Parking		Amount of Each Disbursement this Period 18.00
Candidate Name Lincoln Chafee		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Figmints, Inc.		Date of Disbursement MM / DD / YYYY 03 / 24 / 2015
Mailing Address 163 Exchange St Unit 101		Transaction ID : VQZ639PZK76
City Pawtucket	State RI	
Purpose of Disbursement Fundraising, Website Design		Amount of Each Disbursement this Period 4760.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4843.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Figmints, LLC		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 163 Exchange St Unit 101		Transaction ID : VQZ639PZK34
City Pawtucket	State RI Zip Code 02860-2241	
Purpose of Disbursement Fundraising, Website Design	Category/Type	Amount of Each Disbursement this Period 5240.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. Figmints, LLC		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 163 Exchange St Unit 101		Transaction ID : VQZ639PZK42
City Pawtucket	State RI Zip Code 02860-2241	
Purpose of Disbursement Fundraising, Website Design	Category/Type	Amount of Each Disbursement this Period 4760.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) c. Figmints, LLC		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 163 Exchange St Unit 101		Transaction ID : VQZ639PZK50
City Pawtucket	State RI Zip Code 02860-2241	
Purpose of Disbursement Fundraising, Website Design	Category/Type	Amount of Each Disbursement this Period 820.80
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 10820.80

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Figmints, LLC		Date of Disbursement MM / DD / YYYY 06 / 17 / 2015
Mailing Address 163 Exchange St Unit 101		Transaction ID : VQZ639PZK68
City Pawtucket	State RI Zip Code 02860-2241	
Purpose of Disbursement Fundraising, Website Design	Category/Type	Amount of Each Disbursement this Period 537.50
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. Brian Heller		Date of Disbursement MM / DD / YYYY 03 / 17 / 2015
Mailing Address 200 Olney St		Transaction ID : VQZ639PZJR8
City Providence	State RI Zip Code 02906-1657	
Purpose of Disbursement Recording Studio rental	Category/Type	Amount of Each Disbursement this Period 500.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) c. Debbie Rich		Date of Disbursement MM / DD / YYYY 04 / 22 / 2015
Mailing Address 671 Orleans Ct		Transaction ID : VQZ639PZJP2
City Warwick	State RI Zip Code 02886-1712	
Purpose of Disbursement Communications and scheduling services	Category/Type	Amount of Each Disbursement this Period 2000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 3037.50

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Debbie Rich		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 671 Orleans Ct		Transaction ID : VQZ639PZJT3
City Warwick	State RI	
Purpose of Disbursement Communications and scheduling services		Amount of Each Disbursement this Period 2000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Debbie Rich		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 671 Orleans Ct		Transaction ID : VQZ639PZJY5
City Warwick	State RI	
Purpose of Disbursement Communications and scheduling services		Amount of Each Disbursement this Period 4000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Jonathan Stevens		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 29 Windsor Rd		Transaction ID : VQZ639PZJN4
City Cranston	State RI	
Purpose of Disbursement Campaign Management consulting		Amount of Each Disbursement this Period 6000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 12000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Jonathan Stevens		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 29 Windsor Rd		Transaction ID : VQZ639PZJQ0
City Cranston	State RI	
Purpose of Disbursement Campaign Management consulting		Amount of Each Disbursement this Period 7500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) B. Jonathan Stevens		Date of Disbursement MM / DD / YYYY 04 / 29 / 2015
Mailing Address 29 Windsor Rd		Transaction ID : VQZ639PZJV1
City Cranston	State RI	
Purpose of Disbursement Campaign Management consulting		Amount of Each Disbursement this Period 7500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) c. Jonathan Stevens		Date of Disbursement MM / DD / YYYY 04 / 29 / 2015
Mailing Address 29 Windsor Rd		Transaction ID : VQZ639PZJZ3
City Cranston	State RI	
Purpose of Disbursement office supplies		Amount of Each Disbursement this Period 116.90
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Subtotal Of Receipts This Page (optional)..... 15116.90

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. Jonathan Stevens		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 29 Windsor Rd		Transaction ID : VQZ639PZJX7
City Cranston	State RI	
Purpose of Disbursement Campaign Management consulting		Amount of Each Disbursement this Period 7500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Stripe Inc		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 3180 18th St		Transaction ID : VQZ639PZMX3
City San Francisco	State CA	
Purpose of Disbursement Website donation fees		Amount of Each Disbursement this Period 716.56
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. The Discovery Group, LLC		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address 1145 Main St Ste 3		Transaction ID : VQZ639PZK01
City Pawtucket	State RI	
Purpose of Disbursement rent		Amount of Each Disbursement this Period 300.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 8516.56

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chafee 2016

Full Name (Last, First, Middle Initial) A. The Discovery Group, LLC		Date of Disbursement MM / DD / YYYY 05 / 05 / 2015
Mailing Address 1145 Main St Ste 3		Transaction ID : VQZ639PZK19
City Pawtucket	State RI Zip Code 02860-4807	
Purpose of Disbursement rent	Category/Type	Amount of Each Disbursement this Period 300.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. The Discovery Group, LLC		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address 1145 Main St Ste 3		Transaction ID : VQZ639PZK27
City Pawtucket	State RI Zip Code 02860-4807	
Purpose of Disbursement rent	Category/Type	Amount of Each Disbursement this Period 300.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Subtotal Of Receipts This Page (optional)..... 600.00

Total This Period (last page this line number only)..... 63653.79

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
Chafee 2016

Transaction ID : **VR05BAS1C13L**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Lincoln Chafee

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
PO Box 7328

City	State	ZIP Code
Warwick	RI	02887-7328

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
163694.14	0.00	163694.14

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 01 / D 09 / Y 2015	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/12

Transaction ID : VR05BAS1C13L

Loan from personal funds for campaign use

Form/Schedule:

Transaction ID:

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
Chafee 2016

Transaction ID : **VR05BAS1C39L**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Lincoln Chafee

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
PO Box 7328

City	State	ZIP Code
Warwick	RI	02887-7328

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	200000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 19 / Y 2015	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/12

Transaction ID : VR05BAS1C39L

Personal Loan for campaign use

Form/Schedule:

Transaction ID: