

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, Political Action Committee			Key#
Elaine J Morgan			6763
Street Address		City/Town, State and Zip Code	
60 MAXSON HILL ROAD		ASHAWAY, RI 02804	
Mailing Address (if different)		City/Town, State and Zip Code	
PO BOX 841		ASHAWAY, RI 02804	
Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 744-0505	(401) 222-2708		ELAINEFORSENATE@AOL.COM
If Candidate Office Sought:		Party Affiliation if any:	
State Senator		Republican	
Reporting Period (Dates):		Period Beginning:	Period Ending:
		07/01/2026	10/05/2026
SUMMARY OF ACTIVITY FOR PERIOD			
1. Beginning Cash Balance	\$ 8,890.27	4. Cash Disbursements, continued	
2. Cash Receipts		f. Other Disbursements	0
a. Contributions From:			0
1. Aggregate	4,029.00		0
a. (Individuals)	4,029.00		0
b. (Political Parties)	0	5. Ending Cash Balance	\$ 12,791.00
c. (Political Action Committees)	0		
2. Individuals	1,695.00	CAMPAIGN FUND STATUS	
3. Political Parties	0	6. Report of In-Kind Contributions	266.37
4. Political Action Committees	1,400.00		
5. Loan Proceeds	0	7. Cash	\$ 12,791.00
6. Payroll Check off	0	8. Other Assets	0
7. Interest Received	0		0
8. State Check Off	0		0
9. Refund/Rebate	0	9. Total Assets	\$ 12,791.00
10. Party Building	0		
11. Matching Public Funds	0	LIABILITIES AND FUND BALANCE	
12. Other	0	10. Liabilities	
13. Returned Contributions	0	a. Accounts Payable	\$ 0
14. Returned Checks	0	b. Loans Payable	0
b. Other:	0	c. Other Liabilities	0
	0		0
3. Total Cash	16,014.27		0
4. Cash Disbursements			0
a. Aggregate Expenses	0		0
b. Campaign Expenses	3,223.27	11. Total Liabilities	0
c. Repayment of Loans	0	12. Total Fund Balance	\$ 12,791.00
d. Account Payable Repayments	0	13. Total Liability / Fund Balance	12,791.00
e. Other	0		

Name of Person Filing Report

I HEREBY CERTIFY THAT THIS REPORT OF CAMPAIGN
CONTRIBUTIONS AND EXPENDITURES AND THE SUPPORTING
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 # 6,763	Full Name of Candidate or Committee Elaine J Morgan				Reporting Period From: 07/01/2026 To: 10/05/2026	
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Item	Transaction Type Other	Contribution Type Aggregate - Individual	Receipt Date 08/04/2026	Deposit Date 08/04/2026	Contribution Amount 60.00
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In Kind/Other Receipts Description					
2 donations with Clover payment system					

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Street Address					Street Address	
City			State	Zip	City State Zip	

Item	Transaction Type Other	Contribution Type Aggregate - Individual	Receipt Date 08/13/2026	Deposit Date 08/13/2026	Contribution Amount 225.00
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In Kind/Other Receipts Description					
2 Donations					

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Street Address					Street Address	
City			State	Zip	City State Zip	

Item	Transaction Type Other	Contribution Type Aggregate - Individual	Receipt Date 08/25/2026	Deposit Date 08/25/2026	Contribution Amount 320.83
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In Kind/Other Receipts Description					
fundraiser donations					

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Street Address					Street Address	
City			State	Zip	City State Zip	

Item	Transaction Type Other	Contribution Type Aggregate - Individual	Receipt Date 08/31/2026	Deposit Date 08/31/2026	Contribution Amount 2,280.00
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In Kind/Other Receipts Description					
29 donations Fundraiser donations					

Contributor Information					Employer Data	
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name	
Street Address					Street Address	
City			State	Zip	City State Zip	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Aggregate - Individual	08/31/2026	08/31/2026	313.17

In Kind/Other Receipts Description

donations

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
Street Address					Street Address		
City		State	Zip		City		State Zip

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Aggregate - Individual	09/09/2026	09/09/2026	830.00

In Kind/Other Receipts Description

9 Donations

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
Street Address					Street Address		
City		State	Zip		City		State Zip

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	In-Kind	In-Kind - Individual	09/01/2026		166.37

In Kind/Other Receipts Description

flyers/labels/texting

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Diane		Allen		Allen Seed		
Street Address					Street Address		
74 Raymond Potter LN.							
City		State	Zip		City		State Zip
Exeter		RI	02804		Exeter		RI 02822

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	In-Kind	In-Kind - Individual	08/29/2026		100.00

In Kind/Other Receipts Description

Chairs and tables for fundraiser event Spit with Jasmie Roy

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Jack		Greene		Party Tents for Rent		
Street Address					Street Address		
69 Maxson Hill Rd.					69 Maxson Hill Rd.		
City		State	Zip		City		State Zip
Ashaway		RI	02804		Ashaway		RI 02804

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/29/2026	09/09/2026	290.00

In Kind/Other Receipts Description

Donation2 Checks 90.00 &200.00

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Diane		Allen		Allen Seed		
Street Address					Street Address		
74 Raymond Potter LN.							
City		State	Zip		City		State Zip
Exeter		RI	02804		Exeter		RI 02822

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	08/29/2026	09/09/2026	375.00

In Kind/Other Receipts Description

2 checks 75 \$ 300

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Lisa		Bell		Cedar Crest Nursing Center Street		
Street Address					Street Address		
2 Abbott Valley View Drive					125 Scituate Ave		
City				State	Zip	City	State Zip
Cumberland				RI	02864	Cranston	RI 02920

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Electronic Pay System	Individual	08/19/2026	08/21/2026	100.00

In Kind/Other Receipts Description

Fundraiser donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Donald		Carr		Carr's Overhead Doors, Inc		
Street Address					Street Address		
704 Hazard Rd.					332 Nooseneck Hill Rd		
City				State	Zip	City	State Zip
West Greenwich				RI	02817	Exeter,	RI 02822

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	Individual	07/20/2026	08/13/2026	300.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Thomas	D.	Conway		retired		
Street Address					Street Address		
350 Widow Sweets Rd.							
City				State	Zip	City	State Zip
Exeter				RI	02822		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Electronic Pay System	Individual	08/24/2026	08/26/2026	250.00

In Kind/Other Receipts Description

Fundraiser donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Paul		Delamare		retired		
Street Address					Street Address		
20 Steere Rd							
City				State	Zip	City	State Zip
Greenville				RI	02828		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Electronic Pay System	Individual	08/27/2026	08/31/2026	90.00

In Kind/Other Receipts Description

donationrogers

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Gordon		Rogers				
Street Address					Street Address		
61 Cucumber Hill Rd							
City				State	Zip	City	State Zip
Foster				RI	02825		

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Electronic Pay System	Individual	08/29/2026	08/31/2026	290.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
	Karen		Scully		Brown University		
Street Address					Street Address		
108 Vinagar Hill Rd.					75 Waterman Street		
City			State	Zip	City	State	Zip
Gales Ferry			CT	06335	Providence	RI	

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	08/28/2026	09/09/2026	500.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			HOPKINTON TAXPAYERS UNITED				
Street Address					Street Address		
33 LAWTON FOSTER ROAD SOUTH							
City			State	Zip	City	State	Zip
HOPKINTON			RI	02833			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	07/14/2026	08/13/2026	300.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			RHODE ISLAND REPUBLICAN CONSERVATIV				
Street Address					Street Address		
1800 POST RD SUITE 17-I							
City			State	Zip	City	State	Zip
WARWICK			RI	02886			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	07/28/2026	08/03/2026	100.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			TAXPAYERS UNITED RI				
Street Address					Street Address		
821 MOORESFIELD RD							
City			State	Zip	City	State	Zip
SOUTH KINGSTOWN			RI	02874			

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	07/28/2026	08/03/2026	500.00

In Kind/Other Receipts Description

Donation

Contributor Information					Employer Data		
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name		
			TRANSFORM RI PAC				
Street Address					Street Address		
24 MT VIEW AVENUE							
City			State	Zip	City	State	Zip
NORTH KINGSTOWN			RI	02852			

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period	
6,763	Elaine J Morgan	From: 07/01/2026	To: 10/05/2026

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
458	10/05/2026		Campaign Expenditure	Rent & Utilities	\$194.00

Purpose of Expenditure

Post office box for Hop. rep. town committee and friends of Elaine Morgan

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ashaway Post Master		
Street Address			City	State	Zip
129 Main Street			Ashaway	RI	02804

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
451/452/453	08/18/2026		Campaign Expenditure	Donations (All Others)	\$240.00

Purpose of Expenditure

Sportsmens club annual fundraiser

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Ashaway Sportsman's Club		
Street Address			City	State	Zip
1 Gunclub Pathway,			Hopkinton	RI	02833

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/30/2026		Campaign Expenditure	Office Equipment & Supplies	\$368.91

Purpose of Expenditure

Printer and ink

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			BJ'S WHOLESALE CLUB		
Street Address			City	State	Zip
			COVENTRY	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/28/2026		Campaign Expenditure	Food, Beverages and Meals	\$16.38

Purpose of Expenditure

MTG on property rights

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Brewed Awakenings		
Street Address			City	State	Zip
1316 Bald Hill Rd,			Warwick	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/31/2026		Campaign Expenditure	Bank Fees	\$26.23

Purpose of Expenditure

Clover electronic banking

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Coover		
Street Address			City	State	Zip
415 N. Mathilda Ave.			Sunnyvale	CA	94085
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
455	08/29/2026		Campaign Expenditure	Fundraising Expenses	\$1,050.00
Purpose of Expenditure					
Pig Roast for my fundraiser					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Thomas		Cornicelli		
Street Address			City	State	Zip
18 Sidney Street			West Warwick	RI	02893
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
454	08/29/2026		Campaign Expenditure	Entertainment	\$400.00
Purpose of Expenditure					
Dave Howard Band music for fundraiser					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Dave Howard Band		
Street Address			City	State	Zip
			Warwick	RI	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/22/2026		Campaign Expenditure	Food, Beverages and Meals	\$13.93
Purpose of Expenditure					
Mtg on property rights					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Flat River Tavern		
Street Address			City	State	Zip
2260 Flat River Rd.			Coventry	RI	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/08/2026		Campaign Expenditure	Food, Beverages and Meals	\$137.15
Purpose of Expenditure					
Strategy Meeting with candidate Allen Gorden and campaign Manager Ann Armstrong					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			George's of galilee		
Street Address			City	State	Zip
250 Sand Hill Cove			Narragansett	RI	02882
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
456	08/29/2026		Campaign Expenditure	Donations (Political)	\$25.00
Purpose of Expenditure					
Donation					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Libertarian Mutual Aid. org		
Street Address			City	State	Zip
Mega Template Raise			New York	NY	10001

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
457	09/23/2026		Campaign Expenditure	Donations (Political)	\$100.00
Purpose of Expenditure					
Donation					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
	Westin		Place		
Street Address			City	State	Zip
20 Vars Lane			Bradford	RI	02808
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/29/2026		Campaign Expenditure	Donations (Political)	\$88.49
Purpose of Expenditure					
GOP fundraiser					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			RI GOP		
Street Address			City	State	Zip
1800 Post Rd.			Warwick	RI	02886
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/12/2026		Campaign Expenditure	Fundraising Expenses	\$20.00
Purpose of Expenditure					
GOP fundraiser at Ollies in Warwick					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			RI GOP		
Street Address			City	State	Zip
1800 Post Rd.			Warwick	RI	02886
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/28/2026		Campaign Expenditure	Food, Beverages and Meals	\$255.82
Purpose of Expenditure					
Fundraiser expense					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Richmond Smoke		
Street Address			City	State	Zip
1219 Main St.			Richmond	RI	02898
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/25/2026		Campaign Expenditure	Food, Beverages and Meals	\$59.68
Purpose of Expenditure					
Mtg/fundraiser for Charlestown RTC					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Breachway grill		
Street Address			City	State	Zip
1 Charlestown beach Rd.			Charlestown	RI	02813
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	08/29/2026		Campaign Expenditure	Other	\$56.44
Purpose of Expenditure					
Items for my fundraiser					

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Dollar Tree		
Street Address			City	State	Zip
20 Post Rd.			Westerly	RI	02891
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/07/2026		Campaign Expenditure	Other	\$9.63
Purpose of Expenditure					
Ballons for signing party					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			The Dollar Tree		
Street Address			City	State	Zip
20 Post Rd.			Westerly	RI	02891
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/08/2026		Campaign Expenditure	Food, Beverages and Meals	\$14.70
Purpose of Expenditure					
Signing party for Jessica Drew Day					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Twinn Willows		
Street Address			City	State	Zip
865 Boston Neck Rd.			Narragansett	RI	02882
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/01/2026		Campaign Expenditure	Food, Beverages and Meals	\$50.94
Purpose of Expenditure					
Signing party					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Twisted Pizza		
Street Address			City	State	Zip
567 South County Trail			Exeter	RI	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	09/23/2026		Campaign Expenditure	Food, Beverages and Meals	\$80.40
Purpose of Expenditure					
Westin Place fundraiser					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			Venice Restaurant		
Street Address			City	State	Zip
169 Shore Rd.			Westerly	RI	
Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/10/2026		Campaign Expenditure	Food, Beverages and Meals	\$7.56
Purpose of Expenditure					
Cafeteria at statehouse					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name		Suffix
			West Wing Cafe		
Street Address			City	State	Zip
82 Smith Street			Providence	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
debit	07/13/2026		Campaign Expenditure	Food, Beverages and Meals	\$8.01
Purpose of Expenditure					
Bought a councilwoman a beverage					
Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	Suffix	
			Windjammer		
Street Address			City	State	Zip
321 Atlantic Ave.			Westerly	RI	02891