

RECEIVED
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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

000151837

030608

N 266

RAYMOND F RIGNEY JR
R I BRICKLAYERS POLITICAL ACTI
ON COMMITTEE

ADDRESS (number and street)

POST OFFICE PLAZA
130 MIDWAY ROAD SUITE 133
CRANSTON

RI 02920

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000151837

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) non-Election Year Only

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) non-Election Year Only

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(c) 12-Day PRE-Election Report for this:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day POST-Election Report for this:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01 01 2002

through

03 31 2002

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 Raymond F. Rigney, Jr.

Signature of Treasurer

Raymond F. Rigney, Jr.

Date

04 29 2002

NOTE: Submission of false, inaccurate, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5457g.

Office Use Only

FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

RI Bricklayers Political Action Comm

Report Covering the Period: From: 01 01 2002 To: 03 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002	2,002	6,441.82
(b) Cash on Hand at Beginning of Reporting Period	5,441.82	5,441.82
(c) Total Receipts (from Line 10)	2,992.88	2,992.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8,434.70	8,434.70
7. Total Disbursements (from Line 30)	3,738.85	3,738.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4,695.85	4,695.85
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	0.00
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	0.00

This committee has qualified as a multibandwidth committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9630
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Page 5

Write or Type Committee Name

RI Bricklayers Political Action Comm

Report Covering the Period: From: 01 / 01 / 2002 To: 03 / 31 / 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees:		
(i) Itemized (use Schedule A)	000	
(ii) Unitemized	2,992,888	2,992,888
(iii) TOTAL (add Line 11(a)(i) and (ii))	2,992,888	2,992,888
(b) Political Party Committees	000	000
(c) Other Political Committees (such as PACs)	000	000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	2,992,888	2,992,888
12. Transfers From Affiliates/Other Party Committees	000	000
13. All Loans Received	000	000
14. Loan Repayments Received	000	000
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	000	000
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	000	000
17. Other Federal Receipts (Dividends, Interest, etc.)	000	000
18. Transfers from Nonfederal Account for Joint Activity	000	000
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	2,992,888	2,992,888
20. Total Federal Receipts (subtract Line 18 from Line 19)	2,992,888	2,992,888

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0 0 0	0 0 0
(ii) Non-Federal Share	0 0 0	0 0 0
(b) Other Federal Operating Expenditures	0 0 0	0 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0 0 0	0 0 0
22. Transfers to Affiliated/Other Party Committees	0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	8 0 0 0 0	8 0 0 0 0
24. Independent Expenditures (see Schedule E)	0 0 0	0 0 0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (see Schedule F)	0 0 0	0 0 0
26. Loan Repayments Made	0 0 0	0 0 0
27. Loans Made	0 0 0	0 0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 0 0	0 0 0
(b) Political Party Committees	0 0 0	0 0 0
(c) Other Political Committees (such as PACs)	0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0 0	0 0 0
29. Other Disbursements	2 9 3 8 8 5	2 9 3 8 8 5
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 29(d), and 29)	3 7 3 8 8 5	3 7 3 8 8 5
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	3 7 3 8 8 5	3 7 3 8 8 5

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	2 9 9 2 8 8	2 9 9 2 8 8
33. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	2 9 9 2 8 8	2 9 9 2 8 8
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0 0	0 0 0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
37. Net Operating Expenditures (subtract Line 35 from Line 36)	0 0 0	0 0 0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)						PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 29	
	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29		

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)
RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)
A. Danny Mollo Fund, United Way, Fund

Mailing Address
229 Waterman Street

City: **Providence** State: **RI** Zip Code: **02906**

Purpose of Disbursement: **United Way** Category/Type: **012**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **RI** District:

Date of Disbursement: **01/02/2002**

Amount of Each Disbursement this Period: **1,000.00**

Full Name (Last, First, Middle Initial)
B. Friends of Cianca

Mailing Address
235 Promenade Street, Suite 222

City: **Providence** State: **RI** Zip Code: **02908**

Purpose of Disbursement: **Rundraiser** Category/Type: **011**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **RI** District: **Mayor**

Date of Disbursement: **01/14/2002**

Amount of Each Disbursement this Period: **1,000.00**

Full Name (Last, First, Middle Initial)
C. The Reed Committee

Mailing Address
PO Box 8628

City: **Cranston** State: **RI** Zip Code: **02920-8628**

Purpose of Disbursement: **Rundraiser** Category/Type: **011**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **RI** District: **02aries**

Date of Disbursement: **01/16/2002**

Amount of Each Disbursement this Period: **3,000.00**

SUBTOTAL of Disbursements This Page (optional) **2,300.00**

TOTAL This Period (last page this line number only) **2,300.00**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)					PAGE	OF
<input type="checkbox"/>	21a	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	
<input type="checkbox"/>	26	<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	25	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	28b	<input type="checkbox"/>	29	

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NAME OF COMMITTEE (in Full)
RI Bricklayers Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Friends of Patrick Kennedy

Date of Disbursement
01 / 21 / 2002

Mailing Address
PO Box 321

City State Zip Code
Eastwick RI 02862

Purpose of Disbursement
Fundraiser 011
Category/Type

Candidate Name
Patrick Kennedy

Office Sought: House Senate President
Disbursement For: Primary General
Other (specify) ▾

State: **RI** District

Amount of Each Disbursement this Period
5,000.00

B.
Full Name (Last, First, Middle Initial)
Friends of John E. Harwood

Date of Disbursement
01 / 21 / 2002

Mailing Address
PO Box 28133

City State Zip Code
Providence RI 02908

Purpose of Disbursement
Fundraiser 011
Category/Type

Candidate Name
John E. Harwood

Office Sought: House Senate President
Disbursement For: Primary General
Other (specify) ▾

State: **RI** District

Amount of Each Disbursement this Period
400.00

C.
Full Name (Last, First, Middle Initial)
Providence County Deputy Sheriff

Date of Disbursement
02 / 08 / 2002

Mailing Address
PO Box 1383

City State Zip Code
Providence RI 02901

Purpose of Disbursement
Fundraiser 011
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General
Other (specify) ▾

State: District:

Amount of Each Disbursement this Period
1,000.00

SUBTOTAL of Disbursements This Page (optional) **1,000.00**

TOTAL This Period (last page this line number only)

2002-01-23 15:55:37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)				PAGE	OF
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<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)
RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)
A. Friends of Bill San Bento

Date of Disbursement
03 / 05 / 2002

Mailing Address
494 Smithfield Avenue

City State Zip Code
Pawtucket RI 02860

Purpose of Disbursement
Fundraiser 011 Category/Type

Candidate Name
Bill San Bento

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
B. RI D.A.R.E

Date of Disbursement
03 / 13 / 2002

Mailing Address
19 Vaughn Avenue

City State Zip Code
Newport RI 02840

Purpose of Disbursement
Fundraiser 013 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
C. Service Charge - 01/02 to 3/02

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement
 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) **338.85**

TOTAL This Period (last page this line number only)

2002-03-13 10:55:22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)								PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 29	
	<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 26a	<input type="checkbox"/> 25b	<input type="checkbox"/> 25a	<input type="checkbox"/> 24b	<input type="checkbox"/> 23b	<input type="checkbox"/> 22b	<input type="checkbox"/> 21c	

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NAME OF COMMITTEE (in Full)
RI Bricklayers Political Action Committee

A

Full Name (Last, First, Middle Initial) **Friends of Rep. Joe Faria**

Date of Disbursement: **03 / 19 / 2002**

Mailing Address: **P.O. Box 228**

City: **Central Falls** State: **RI** Zip Code: **02869**

Purpose of Disbursement: **Fundraiser** Category/Type: **011**

Candidate Name: **Joe Faria**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **RI** District:

Amount of Each Disbursement this Period: **100.00**

B

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period

C

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period


SUBTOTAL of Disbursements This Page (optional) **100.00**

TOTAL This Period (last page this line number only)

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 4-17-02
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify)	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	4-22-02 DATE PREPARED