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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

CO0329326

PLUMBERS & PIPEFITTERS LOCAL 51

ADDRESS (number and street)

POLITICAL ACTION COMMITTEE

Check if different than previously reported. (ACG)

11 HEMINGWAY DRIVE

EAST PROVIDENCE, RI 02915

Attn: MJ Carreiro

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00329326

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 the:

Primary (12P)

General (12G)

Runoff (12R)

Report for the:

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04 01 2002

through

06 30 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

Michael J. Carreiro

Signature of Treasurer

Date

07 12 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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

Plumbers & Pipe Fitters Local Union 51 P.A.C.

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2002 | 2,573.73 | 2,573.73 |
| (b) Cash on Hand at Beginning of Reporting Period | 2,573.73 | |
| (c) Total Receipts (from Line 19) | 0 | 0 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 2,573.73 | 2,573.73 |
| 7. Total Disbursements (from Line 20) | 0 | 0 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 2,573.73 | 2,573.73 |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | 0 | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | 0 | |

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

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Plumbers & Pipefitters Local 51 P.A.C.

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

| 1. 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 (see Schedule A) | | |
| (ii) Unitemized | 0 | 0 |
| (iii) TOTAL (add | | |
| Lines 11(a)(i) and (ii) | 0 | 0 |
| (b) Political Party Committees | | |
| (c) Other Political Committees | | |
| (such as PACs) | 0 | 0 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii), (b), and (c) (Carry | | |
| Totals to Line 32, page 4) | | |
| 12. Transfers From Affiliated/Other | | |
| Party Committees | | |
| 13. All Loans Received | | |
| 14. Loan Repayments Received | | |
| 15. Offsets To Operating Expenditures | | |
| (Relunds, Reates, etc.) | | |
| (Carry Totals to Line 36, page 4) | | |
| 16. Refunds of Contributions Made | | |
| to Federal Candidates and Other | | |
| Political Committees | | |
| 17. Other Federal Receipts | | |
| (Dividends, Interest, etc.) | | |
| 18. Transfers from Nonfederal | | |
| Account for Joint Activity | | |
| 19. Total Receipts (add Lines 11(d), | | |
| 12, 13, 14, 15, 16, 17, and 18) | 0 | 0 |
| 20. Total Federal Receipts | | |
| (subtract Line 18 from Line 19) | 0 | 0 |

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 | | |
| (ii) Non-Federal Share | | |
| (b) Other Federal Operating Expenditures | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | |
| 22. Transfers to Affiliated/Other Party Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | |
| 24. Independent Expenditures (use Schedule E) | | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) | | |
| 26. Loan Repayments Made | | |
| 27. Loans Made | | |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (c) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | |
| 29. Other Disbursements | | |
| 30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) | | |
| 31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) | | |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans) (from Line 11(d), page 3) | | |
| 33. Total Contribution Refunds (from Line 28(d)) | | |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) | | |
| 35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | | |
| 36. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 37. Net Operating Expenditures (subtract Line 36 from Line 35) | | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | | | |
|---|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE | | OF | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 |

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)
Plumbers + Pipefitters LOCAL 51 P.A.C.

A.

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) _____

Aggregate Year-to-Date ▼ _____

Date of Receipt
____/____/____

Amount of Each Receipt this Period

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) _____

Aggregate Year-to-Date ▼ _____

Date of Receipt
____/____/____

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) _____

Aggregate Year-to-Date ▼ _____

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 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 checked="" 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"/> 25 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 28d | <input type="checkbox"/> 28e | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Plumbers + Pipe Fitters Local Union 51 P.A.C.

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

SUBTOTAL of Disbursements This Page (optional) _____ ▶

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) 7-15-02 |
| <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 | |
| <i>AMP</i> PREPARER | 7-21-02 DATE PREPARED |