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Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF COMMITTEE (In full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

ADDRESS (number and street)

C00151837 061404 R
RAYMOND F RIGNEY JR
R I BRICKLAYERS POLITICAL ACTI
ON COMMITTEE
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

C 00151837

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(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)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM/DD/YYYY

In the State of

STATE

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM/DD/YYYY

In the State of

STATE

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY

06/30/2004

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

MM/DD/YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form **SX** (Rev. 02/2009)

Page 2

Write or Type Committee Name

RI Bricklayers Political Action Comm

Report Covering the Period:

From:

0.4 / 0.1 / 2004

To:

0.6 / 3.0 / 2004

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, <input type="text" value="2004"/>		<input type="text" value="584027"/>
(b) Cash on Hand at Beginning of Reporting Period	<input type="text" value="606913"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="207277"/>	<input type="text" value="440548"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<input type="text" value="814190"/>	<input type="text" value="1024575"/>
7. Total Disbursements (from Line 31)	<input type="text" value="152358"/>	<input type="text" value="362743"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="661832"/>	<input type="text" value="661832"/>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="000"/>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="000"/>	



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

Write or Type Committee Name

RI Bricklayers Political Action Comm

Report Covering the Period:

From:

0 4 / 0 1 / 2 0 0 4

To:

0 6 / 3 0 / 2 0 0 4

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)

0 0 0

(ii) Unitemized

2 0 7 2 7 7

(iii) TOTAL (add Lines 11(a)(i) and (ii))

2 0 7 2 7 7

4 4 0 5 4 8

(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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

2 0 7 2 7 7

4 4 0 5 4 8

12. Transfers From Affiliated/Other Party Committees

0 0 0

0 0 0

13. All Loans Received

0 0 0

0 0 0

14. Loan Repayments Received

0 0 0

0 0 0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)

0 0 0

0 0 0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

0 0 0

0 0 0

17. Other Federal Receipts (Dividends, Interest, etc.)

0 0 0

0 0 0

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)

0 0 0

0 0 0

(b) Levin Funds (from Schedule H5)

0 0 0

0 0 0

(c) Total Transfers (add 18(a) and 18(b))

0 0 0

0 0 0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))

2 0 7 2 7 7

4 4 0 5 4 8

20. Total Federal Receipts (subtract Line 18(c) from Line 19)

2 0 7 2 7 7

4 4 0 5 4 8

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	3 0 0 0 0	8 0 0 0 0
24. Independent Expenditures (use Schedule E)	0 0 0	0 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use 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	1 2 2 3 5 8	2 8 2 7 4 3
30. Federal Election Activity (2 U.S.C. §431(2D))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 0 0	0 0 0
(ii) "Levin" Share	0 0 0	0 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 0 0	0 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0 0 0	0 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1 5 2 3 5 8	3 6 2 7 4 3
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31)	0 0 0	0 0 0

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2,072,777	4,405,488
34. Total Contribution Refunds (from Line 28(d))	000	000
35. Net Contributions (other than loans) (subtract Line 33 from Line 32)	2,072,777	4,405,488
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	000	000
37. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
38. Net Operating Expenditures (subtract Line 36 from Line 35)	000	000

**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 1 OF 5

<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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28	<input type="checkbox"/> 30b

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 Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
03	26	2004

A.

Fogarty for Senate

Mailing Address
PO Box 37

City State Zip Code
Harmony RI 02829

Purpose of Disbursement

Fundraiser

007

Candidate Name

Paul Fogarty

Office Sought:

<input type="checkbox"/> House
<input checked="" type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

5000

B.

Sen. Domenic Ruggerio Comm

Mailing Address

c/o 7 Great View Avenue

City State Zip Code
North Providence RI 02904

Purpose of Disbursement

Fundraiser

007

Candidate Name

Domenic Ruggerio

Office Sought:

<input type="checkbox"/> House
<input checked="" type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

MM	DD	YYYY
05	03	2004

Amount of Each Disbursement this Period

30000

C.

Cranston Police Relief

Mailing Address

275 Atwood Avenue

City State Zip Code
Cranston RI 02910

Purpose of Disbursement

Fundraiser

012

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:

Date of Disbursement

MM	DD	YYYY
05	03	2004

Amount of Each Disbursement this Period

50000

SUBTOTAL of Disbursements This Page (optional).....

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

40000

**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)

<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"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

A. RI Juvenile Officers Association, Inc.

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2004

Mailing Address

770 Reservoir Avenue

City
Cranston

State Zip Code
RI 02910

Purpose of Disbursement

Fundraiser

0 1 2

Amount of Each Disbursement This Period

5000

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Providence Central Federated Council

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2004

Mailing Address

199 Wingate Avenue

City
Warwick

State Zip Code
RI 02888

Purpose of Disbursement

Fundraiser

0 1 2

Amount of Each Disbursement This Period

10000

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Friends of Brian Patrick Kennedy

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2004

Mailing Address

PO Box 101

City
Ashaway

State Zip Code
RI 02804

Purpose of Disbursement

Fundraiser

0 0 7

Amount of Each Disbursement This Period

10000

Candidate Name

Brian Patrick Kennedy

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

25000

**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)

<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"/> 28b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
05	18	2004

A.

Connors Campaign Comm

Mailing Address

370 Bryant Street

City

Cumberland

State

RI

Zip Code

02864

Purpose of Disbursement

Fundraiser

007
Category/Type

Amount of Each Disbursement this Period

7500

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
05	18	2004

B.

Friends of Paula McFarland

Mailing Address

100 Pomham Street

City

Cranston

State

RI

Zip Code

02910

Purpose of Disbursement

Fundraiser

007
Category/Type

Amount of Each Disbursement this Period

15000

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
05	18	2004

C.

Friends of Bill San Bento

Mailing Address

494 Smithfield Avenue

City

Pawtucket

State

RI

Zip Code

02860

Purpose of Disbursement

Fundraiser

007
Category/Type

Amount of Each Disbursement this Period

10000

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

32500

**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)

<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"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

05 / 18 / 2004

A.

Representative DeSimone Comm

Mailing Address

18 Ralston Street

City State Zip Code
Providence RI 02904

Purpose of Disbursement

Fundraiser

Candidate Name

0,07
Category/
Type

Amount of Each Disbursement this Period

50.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Friends of Daniel DaPonte

Mailing Address

81 Jenks Street

City State Zip Code
East Providence RI 02914

Purpose of Disbursement

Fundraiser

Candidate Name

Daniel DaPonte

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

60.00

C.

Cicccone for Senator

Mailing Address

15 Mercy Street

City State Zip Code
Providence RI 02902

Purpose of Disbursement

Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

310.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 28
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
06	04	2004

A.

The Reed Committee

Mailing Address
PO Box 8628

City State Zip Code
Cranston RI 02920

Purpose of Disbursement

Fundraiser
Candidate Name

007
Category/ Type

Amount of Each Disbursement this Period

20000

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Service Charge 3/04 - 6/04
Candidate Name

Category/ Type

Amount of Each Disbursement this Period

3858

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

--

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

23858

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC 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"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7-9-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>SC1</i> PREPARER	7-14-04 DATE PREPARED