

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.

C00151837  030602  N 266

Raymond F. Rigney, Jr.

12FE4M5

R. I. Bricklayers Political Action Committee

ADDRESS (number and street) **Post Office Plaza**

Check if different than previously reported. (ADC)

150 Midway Road, Suite 153

Cranston RI 02920-5743

2. FEC IDENTIFICATION NUMBER **C 0 0 1 5 J 8 3 7**

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)  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)

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

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on: [ ] / [ ] / [ ] In the State of [ ]

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

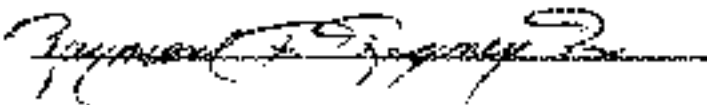
General (30G)  Runoff (30R)  Special (30S)

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 Raymond F. Rigney, Jr.

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.

**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: 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	2,002	6,641.82
(b) Cash on Hand at Beginning of Reporting Period	5,695.55	
(c) Total Receipts (from Line 19)	2,294.36	5,287.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7,990.21	11,729.06
7. Total Disbursements (from Line 30)	2,323.85	6,052.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	5,666.36	5,676.36
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

**For further information contact:**

Federal Election Commission  
99B 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

RI Bricklayers Political Action Comm

Report Covering the Period: From: 04/01/2002 To: 06/30/2002

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 (Less Schedule A) .....	0 0 0	
(ii) Unitemized .....	2 2 9 4 3 6	
(iii) TOTAL (add Lines 11(i)(1) and (ii)) .....	2 2 9 4 3 6	5 2 8 7 2 4
(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)(i), (b), and (c)) (Carry Totals to Line 32, page 4) .....	2 2 9 4 3 6	5 2 8 7 2 4
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 36, page 4) .....	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 Nonfederal Account for Joint Activity .....	0 0 0	0 0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	2 2 9 4 3 6	5 2 8 7 2 4
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	2 2 9 4 3 6	5 2 8 7 2 4

**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 .....	5 0 0 0 0	1 3 0 0 0 0
24. Independent Expenditures (use Schedule E) .....	0 0 0	0 0 0
25. Coordinated Expenditures Made by Party Committees (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 8 2 3 8 5	4 7 6 2 7 0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....	2 3 2 3 8 5	6 0 6 2 7 0
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....	2 3 2 3 8 5	6 0 6 2 7 0

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2 2 9 4 3 6	5 2 8 7 2 4
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 2 9 4 3 6	5 2 8 7 2 4
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 36 from Line 35) .....	0 0 0	0 0 0

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

22037652685

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 3

21b  22  23  24  25  
 26  27  28a  28b  28c  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 Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 05 / 2002

A.

Cranston Relief Fund

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement

012  
Category/  
Type

Candidate Name

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

State: District:

B.

Buggerio, Dominick J.

Mailing Address

7 Great View Avenue

City State Zip Code

Date of Disbursement

05 / 05 / 2002

Amount of Each Disbursement this Period

300.00

North Providence, RI 02904

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

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

State: District:

C.

Friends of Constantine c/o Ticket Comm.

Mailing Address

2 Colonial Drive

City State Zip Code

Date of Disbursement

05 / 05 / 2002

Amount of Each Disbursement this Period

50.00

North Providence, RI 02904

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (explor) ▶

450.00

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

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

22037652686

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

FOR LINE NUMBER: (check only one)

PAGE 2 OF 5

21b  22  23  24  25  
 26  27  26a  26b  26c  29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of raising 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)  
**RI Juvenile Officers Assoc.**

Mailing Address  
**770 Reservoir Avenue**

City **Cranston** State **RI** Zip Code **02920**

Purpose of Disbursement  
**Fundraiser** Category/Type **0,1,2**

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**06 / 11 / 2002**

Amount of Each Disbursement this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**Rep. DeSimone Comm.**

Mailing Address  
**18 Ralston Street**

City **Providence** State **RI** Zip Code **02904**

Purpose of Disbursement  
**Fundraiser** Category/Type **0,1,1**

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**06 / 11 / 2002**

Amount of Each Disbursement this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**Guither, Scott J. Friends of**

Mailing Address  
**31 Maplewood Drive**

City **Coventry** State **RI** Zip Code **02816**

Purpose of Disbursement  
**Fundraiser** Category/Type **0,1,1**

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**06 / 11 / 2002**

Amount of Each Disbursement this Period  
**5000**

SUBTOTAL of Disbursements This Page (optional) ..... **15000**

TOTAL This Period (last page this line number only) ..... **15000**

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"/> 25	<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"/> 28				

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NAME OF COMMITTEE (in Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

A.

Smith, Steven F., Comm

Date of Disbursement

06/11/2002

Mailing Address

59 King Philip Street

City

State

Zip Code

Providence

RI

02909

Purpose of Disbursement

Fundraiser

D 1 1  
Category/  
Type

Amount of Each Disbursement This Period

3540

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Langevin for Congress

Date of Disbursement

06/11/2002

Mailing Address

301 4th Street NW

City

State

Zip Code

Washington

DC

20002

Purpose of Disbursement

Fundraiser

Q 1 1  
Category/  
Type

Amount of Each Disbursement This Period

5000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Pogarty For Senate

Date of Disbursement

06/12/2002

Mailing Address

PO Box 37

City

State

Zip Code

Harmony

RI

02829

Purpose of Disbursement

Fundraiser

Q 1 1  
Category/  
Type

Amount of Each Disbursement This Period

1000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

6350.00

TOTAL This Period (last page this line number only)

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

22037652688

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				

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

**A.**

Inman, Edward III Friends of

Mailing Address  
PO Box 1643

City: Providence State: RI Zip Code: 02901

Purpose of Disbursement: Fundraiser Category/Type: 0 1 1

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 06 / 12 / 2002

Amount of Each Disbursement this Period: 5000

**B.**

Kennedy, Patrick Friends of

Mailing Address  
400 C Street, N.E., Suite 201

City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: Fundraiser Category/Type: 0 1 1

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 06 / 12 / 2002

Amount of Each Disbursement this Period: 5000.00

**C.**

Whitehouse, Sheldon

Mailing Address  
PO Box 6765

City: Providence State: RI Zip Code: 02940-6765

Purpose of Disbursement: Fundraiser Category/Type: 0 1 1

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 06 / 12 / 2002

Amount of Each Disbursement this Period: 3000

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8,500.00

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



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

22037652689

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 3

<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"/> 29

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NAME OF COMMITTEE (in full)

RI Bricklayers Political Action Comm

Full Name (Last, First, Middle Initial)

Date of Disbursement

06 / 19 / 2002

A.

McFarland, Paula Friends of

Mailing Address

100 Pomfret Street

City

State

Zip Code

Cranston

RI

02910

Purpose of Disbursement

Fundraiser

Candidate Name

0111  
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

00 / 00 / 00

B.

Service Charge

4/02 - 6/02/02

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

0000  
Category/Type

Amount of Each Disbursement This Period

3885

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

00 / 00 / 00

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

0000  
Category/Type

Amount of Each Disbursement This Period

0000

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)

23885

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) 7-12-02
<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>Jm</i>	7-17-02
PREPARER	DATE PREPARED

(6/21/00)

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