

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
 For an Authorized Committee  
 (Summary Page)

RECEIVED  
 U.S. SENATE

<b>C00344184</b>  <b>Weygand Committee</b> <b>150 Midway Road</b> <b>Cranston, RI 02920</b>	<b>05-0482889</b>  RI/Senate	<p align="right">03 OCT 30 AM 10:42</p> 2. FEC IDENTIFICATION NUMBER <p align="center"><b>C00344184</b></p> 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
---	------------------------------------	---

**4. TYPE OF REPORT**

<input type="checkbox"/> April 15 Quarterly Report	<input checked="" type="checkbox"/> Twelfth day report preceding <u>General</u> election on <u>11-07-00</u> in the State of <u>RI</u>
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Termination Report
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report	

activity for     Primary Election     General Election     Special Election     Runoff Election

**SUMMARY**

5. Covering Period <u>10-01-00</u> through <u>10-18-00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (from Line 11(e))	\$132,280.55	\$1,033,216.77
(b) Total Contribution Refunds (from Line 20(d))	\$1,000.00	\$1,700.00
(c) Net Contributions (Line 6(b) from Line 6(a))	\$131,280.55	\$1,031,516.77
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)	\$201,349.29	\$1,833,777.57
(b) Total Offsets to Operating Expenditures (from 14)		\$741.71
(c) Net Operating Expenditures (Line 7(a) - Line 7(b))	\$201,349.29	\$1,833,035.86
<b>8. Cash on Hand at Close of Reporting Period (Line 27)</b>	<b>\$200,187.79</b>	Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530
<b>9. Debts and Obligations Owed TO the Committee</b>		
<b>10. Debts and Obligations Owed BY the Committee</b>		

I certify that I have examined this report and it is correct and complete.

Type or Print Name of Treasurer <b>Peter Fogarty CPA/CFE</b>	
Signature of Treasurer 	Date 10/24/00

NOTE: Submission of false, erroneous, or incomplete information may subject signer to penalties.

DETAILED SUMMARY PAGE  
of Receipts and Disbursements

Weygand Committee	C00344154	from 10-01-00	to 10-18-00
I. RECEIPTS		COLUMN A This Period	COLUMN B Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (Use Schedule A) .....		\$70,225.00	
(ii) Unitemized .....		\$8,685.55	
(iii) Total of contributions from individuals .....		\$78,910.55	\$864,281.77
(b) Political Party Committees .....			\$18,500.00
(c) Other Political Committees (such as PACs) .....		\$53,350.00	\$352,455.00
(d) The Candidate .....			
(e) TOTAL CONTRIBUTIONS (11(a)(i)+(b)+(c)+(d)) .....		\$132,260.55	\$1,033,216.77
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>			
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate .....			
(b) All Other Loans .....			
(c) TOTAL LOANS (add 13(a) and (b)) .....			
<b>14. OFFSETS TO OPERATING EXPENDITURES (refunds, etc.) ..</b>			\$741.71
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>			\$31,484.87
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....</b>		<b>\$132,260.66</b>	<b>\$1,085,453.35</b>
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES .....</b>		<b>\$201,349.29</b>	<b>\$1,833,777.57</b>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....</b>			
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate .....			
(b) Of All Other Loans .....			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....			
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals, Persons Other than Political Committees ..		\$1,000.00	\$1,200.00
(b) Political Party Committees .....			
(c) Other Political Committees (such as PACs) .....			\$500.00
(d) TOTAL CONTRIBUTION REFUNDS (20(a) + (b) + (c)) ..		\$1,000.00	\$1,700.00
<b>21. OTHER DISBURSEMENTS .....</b>			
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) ..</b>		<b>\$202,349.29</b>	<b>\$1,835,477.57</b>
<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>			<b>\$270,276.53</b>
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>			<b>\$132,260.55</b>
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>			<b>\$402,537.08</b>
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>			<b>\$202,349.29</b>
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Line 25 - Line 26)</b>			<b>\$200,187.79</b>

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 1 OF 17

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Elliot S. Cohen 1020 Park Avenue, Suite 102 Cranston, RI 02910	Self-employed	10-04-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$1,100.00	
B. Full Name, Mailing Address and ZIP Code John R. Parziale 8 Nathaniel Guild Road Sharon, MA 02867	Self-employed	10-03-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
	Year-to-Date >	\$500.00	
C. Full Name, Mailing Address and ZIP Code Girard R. Visconti 380 Rumstick Road Barrington, RI 02806	Visconti and Boren, Inc.	10-03-00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$650.00	
D. Full Name, Mailing Address and ZIP Code Norma H. Mercilla 133 Gilbert Stuart Drive East Greenwich, RI 02818		10-02-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$500.00	
E. Full Name, Mailing Address and ZIP Code Michael S. Schwartz 4 Eden Court Lincoln, RI 02865	Mandell, Schwartz and Bol	10-02-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$500.00	
F. Full Name, Mailing Address and ZIP Code Myrth York 48 Lloyd Avenue Providence, RI 02906	Vice President	10-02-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation York Resources		
	Year-to-Date >	\$500.00	
G. Full Name, Mailing Address and ZIP Code Allan Fung 41 Hollyhock Drive Cranston, RI 02920	Rhode Island Department o	10-02-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$250.00	

SUBTOTAL of Receipts This Page (optional) .....	\$3,450.00
TOTAL This Period (last page this line number only) .....	-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from IL

NAME OF COMMITTEE (in Full)

Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Henry V. Collins Jr. P.O. Box 2388 Providence, RI 02906-0388	H.V. Collins, Inc.	10-05-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Robert D. Twomey 8 Briarfield Barrington, RI 02808	Fleet Bank	10-05-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker		
	Year-to-Date >	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
William B. Kaplan 5327 North Sheridan Road, Suite 100 Chicago, IL 60661	Senior Lifestyles Inc.	10-10-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman		
	Year-to-Date >	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Carol Kaplan 2008 North Mohawk Drive Chicago, IL 60614		10-10-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Jon A. DeLuca 59 Salem Lane Evanston, IL 60203	Senior Lifestyles Corpora	10-08-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chief Financial Officer		
	Year-to-Date >	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Daniel M. Long 16813 Orlanbrook Drive, Unit 50 Orland Park, IL 60462	Senior Lifestyles Corpora	10-06-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Year-to-Date >	\$500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Maria Oliva 10721 South Long Oak Lawn, IL 60453	Senior Lifestyles Corpora	10-08-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Vice President		
	Year-to-Date >	\$1,000.00	

SUBTOTAL of Receipts This Page (optional) .....	\$5,750.00
TOTAL This Period (last page this line number only) .....	.....

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Stewart M. Casper 72 Selr Hill Road Wilton, CT 06897	Casper and DeToledo, LLC	10-06-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$250.00	
B. Full Name, Mailing Address and ZIP Code John C. Houle 103 Longwood Avenue Warwick, RI 02888	Name of Employer Generations Communications	Date 10-06-00	Amount this pd. \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Account Executive		
	Year-to-Date >	\$230.00	
C. Full Name, Mailing Address and ZIP Code Joseph M. O'Rally P.O. Box 81074 Warwick, RI 02888	Name of Employer Minet Settlement	Date 10-12-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant		
	Year-to-Date >	\$500.00	
D. Full Name, Mailing Address and ZIP Code Aram Scheffrin One Winsor Drive Barrington, RI 02806	Name of Employer Lovatt, Scheffrin and Harn	Date 10-12-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Charles E. Weygand Jr. 1460 Stony Lane North Kingstown, RI 02852	Name of Employer Cartilele Plastics	Date 10-12-00	Amount this pd. \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Salesman		
	Year-to-Date >	\$650.00	
F. Full Name, Mailing Address and ZIP Code James F. Ahern 15 Wachusett Drive, Box 18 Sutton, MA 01590	Name of Employer Drake Petroleum Company	Date 10-17-00	Amount this pd. \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$250.00	
G. Full Name, Mailing Address and ZIP Code Edward A. Rachins P.O. Box 250 Brockton, MA 02303-0250	Name of Employer Mutual Oil Company	Date 10-17-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$500.00	

SUBTOTAL of Receipts This Page (optional) . . . . . >	\$2,800.00
TOTAL This Period (last page this line number only) . . . . . >	-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Weygard Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>W. Lincoln Mossop</b> 42 Waybossett Street Providence, RI 02903-2855	<b>Barrett and Company</b>	10-17-00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Investments</b>		
	Year-to-Date > \$300.00		
<b>Terry U. Mossop</b> 291 Spencer Avenue East Greenwich, RI 02818	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Retired</b>	10-17-00	\$1,000.00
	Year-to-Date > \$1,000.00		
<b>George J. McNelly</b> 6979 S.E. Harbor Circle Stuart, FL 34996	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Retired</b>	10-17-00	\$500.00
	Year-to-Date > \$500.00		
<b>Seminole Tribe of Florida</b> 8300 Stirling Road Hollywood, FL 33014	Name of Employer <b>Funds</b> <b>permissible</b>	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>under the Act</b>	10-17-00	\$2,000.00
	Year-to-Date > \$2,000.00		
<b>Charlotte A. Haberoecker</b> 4021 Honey Lane Annandale, VA 22003	Name of Employer <b>Fannie Mae</b>	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Vice President</b>	10-17-00	\$500.00
	Year-to-Date > \$500.00		
<b>Grace A. Huebschar</b> 6224 32nd Place North West Washington, DC 20015	Name of Employer <b>Fannie Mae</b>	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Vice President</b>	10-17-00	\$500.00
	Year-to-Date > \$500.00		
<b>Geoffrey Smith</b> 936 Kilduff Circle West Chester, PA 19382-7405	Name of Employer <b>Fannie Mae</b>	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Vice President</b>	10-17-00	\$500.00
	Year-to-Date > \$500.00		
<b>SUBTOTAL of Receipts This Page (optional) . . . . . &gt;</b>			<b>\$5,300.00</b>
<b>TOTAL This Period (last page this line number only) . . . . . &gt;</b>			<b>-----</b>

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(f)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)  
Weygard Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Kathleen Almonte 120 Suddard Lane North Scituate, RI 02857		10-17-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$500.00	
B. Full Name, Mailing Address and ZIP Code Robert M. Andreoli 1099 Reservoir Avenue Cranston, RI 02910	Name of Employer Andreoli Associates	10-17-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman		
	Year-to-Date >	\$500.00	
C. Full Name, Mailing Address and ZIP Code Nathaniel B. Baker 738 Elmgrove Avenue Providence, RI 02906	Name of Employer Domestic Bank	10-17-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Susan Clarke 90 Fresh Meadow Road Wakefield, RI 02879	Name of Employer UMass Dartmouth	10-17-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Computer Programmer		
	Year-to-Date >	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Eva Marie Marcuso 559 Congdon Hill Road Saundertown, RI 02874	Name of Employer Hamel, Waxler, Allan and	10-17-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code Sean P. Feeney 559 Congdon Hill Road Saundertown, RI 02874	Name of Employer Healy and Feeney	10-17-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code Jennie D. Frisella 247 Woodruff Avenue Wakefield, RI 02879	Name of Employer	10-17-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$500.00	
SUBTOTAL of Receipts This Page (optional) >			\$5,500.00
TOTAL This Period (last page this line number only) >			-----

Contributions from Individuals/Persons

FOR LINE NUMBER 17(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Anthony J. Santoro 168 Bay Point Road Swansea, MA 02777	Roger Williams College	10-17-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chancellor and CEO		
	Year-to-Date >	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code Sheldon S. Sollosy 35 Shirley Boulevard Cranston, RI 02910	Name of Employer Manpower Temporary Servis	Date 10-17-00	Amount this pd. \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$250.00	
C. Full Name, Mailing Address and ZIP Code Andrew Lipton 1628 Elkton Place Cincinnati, OH 45224	Name of Employer Monley, Burke and Lipton	Date 10-17-00	Amount this pd. \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$250.00	
D. Full Name, Mailing Address and ZIP Code Steven M. Clarke 90 Fresh Meadow Road Wakefield, RI 02879	Name of Employer Commonwealth Engineers	Date 10-17-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer		
	Year-to-Date >	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Timothy C. Duffy 479 Lloyd Avenue Providence, RI 02906	Name of Employer Rhode Island Association	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Year-to-Date >	\$1,500.00	
F. Full Name, Mailing Address and ZIP Code Michael H. Marra 135 Tripps Lane East Providence, RI 02915	Name of Employer Orchard View Manor	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$825.00	
G. Full Name, Mailing Address and ZIP Code Robert J. Bonsignore 23 Forest Street Medford, MA 02155	Name of Employer Self-employed	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$500.00	

SUBTOTAL of Receipts This Page (optional) . . . . . >	\$4,000.00
TOTAL This Period (last page this line number only) . . . . . >	.....



Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Michael J. Nerl 32 Kirby Avenue Warwick, RI 02888	Oldsmobile-Buick-GMC Truc	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Year-to-Date >	\$250.00
B. Full Name, Mailing Address and ZIP Code Angelo F. Grilli 89 Indian Avenue Portsmouth, RI 02871	Self-employed	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manufacturing	Year-to-Date >	\$500.00
C. Full Name, Mailing Address and ZIP Code Sheree B. Kaplan 206 Elmwood Avenue Providence, RI 02907	Jake Kaplan's Ltd.	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Year-to-Date >	\$500.00
D. Full Name, Mailing Address and ZIP Code Edward L. Shore 80 Shirley Boulevard Cranston, RI 02910	Self-employed	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manufacturing	Year-to-Date >	\$500.00
E. Full Name, Mailing Address and ZIP Code Stephen D. Alves 34 Sweet Briar Lane West Warwick, RI 02883	Tucker Anthony	10-18-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Stockbroker	Year-to-Date >	\$358.15
F. Full Name, Mailing Address and ZIP Code David N. Cicilline 702 Elmgrove Avenue Providence, RI 02905	Self-employed	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law	Year-to-Date >	\$1,000.00
G. Full Name, Mailing Address and ZIP Code J. Joseph Garraty 170 Westminster Street, 8th Floor Providence, RI 02903	Self-employed	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Year-to-Date >	\$1,000.00

SUBTOTAL of Receipts This Page (optional) ..... > \$3,850.00

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

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Daniel E. Koury 36 Congdon Street Narragansett, RI 02882	Koury Construction	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Year-to-Date >	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Jennifer A. Marran 1 Secluded Drive Wakefield, RI 02879	Name of Employer Christ the King Parish	10-18-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Year-to-Date >	\$250.00
C. Full Name, Mailing Address and ZIP Code John J. McCauley Jr. 71 Common Street Providence, RI 02908	Name of Employer City of Providence	10-18-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chief Plumbing Inspector	Year-to-Date >	\$600.00
D. Full Name, Mailing Address and ZIP Code James P. McStay 2555 Pawtucket Avenue East Providence, RI 02915	Name of Employer Parry-McStay Funeral Home	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Funeral Director	Year-to-Date >	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Sandra D. Oster 223 Rumstick Road Barrington, RI 02806	Name of Employer	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date >	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Richard M. Oster 223 Rumstick Road Barrington, RI 02806	Name of Employer	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date >	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Albert R. Romano 735 Smith Street Providence, RI 02908	Name of Employer Self-employed	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law	Year-to-Date >	\$500.00
SUBTOTAL of Receipts This Page (optional) >			\$4,200.00
TOTAL This Period (last page this line number only) >			-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Stephen R. White 126 Hundred Acre Pond West Kingston, RI 02892	Self-employed	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$1,125.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Maria Zammello 544 Airport Road Warwick, RI 02886		10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Russell J. Boyle 331 Smith Street Providence, RI 02908	Russell J. Boyle and Son	10-18-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Funeral Director		
	Year-to-Date >	\$300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Margherite Garrahy 474 Ocean Road Narragansett, RI 02882		10-18-00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Year-to-Date >	\$1,035.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Joseph H. Hegan P.O. Box 548 Little Compton, RI 02837	Roger Williams University	10-18-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$525.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Peter-Harry Montaudes 40 McIntosh Court Malverne, NY 11565	Self-employed	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Appraiser		
	Year-to-Date >	\$500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Michael J. Nowak 90 Caperson Avenue North Kingstown, RI 02852	U.S. Navy	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer		
	Year-to-Date >	\$500.00	

SUBTOTAL of Receipts This Page (optional) .....	\$2,900.00
TOTAL This Period (last page this line number only) .....	-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Peter M. Castriotta</b> Harris Road Smithfield, RI 02917	<b>Meat Construction, Inc.</b>	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Construction Coordinator		
	Year-to-Date >	\$500.00	
<b>Giovanni A. Colagiovanni</b> 2 Valley Drive Johnston, RI 02919	<b>Lincoln Packing Construct</b>	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$500.00	
<b>Michael L. DeCesare</b> 77 Ophella Street Providence, RI 02909	<b>DeCesare Building Company</b>	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation General Contractor		
	Year-to-Date >	\$500.00	
<b>Rocco DeLuca</b> Woodward Road North Providence, RI 02904	<b>Global Internet Technolog</b>	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Owner		
	Year-to-Date >	\$1,000.00	
<b>Debra L. Ferland</b> 30 Monticello Road Pawtucket, RI 02861	<b>Ferland Corporation</b>	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director		
	Year-to-Date >	\$1,000.00	
<b>Antonio A. Giordano Jr.</b> 229 Potter Road North Kingstown, RI 02882	<b>Consultants Incorporated</b>	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman		
	Year-to-Date >	\$500.00	
<b>Edward L. Magglacono</b> 2300 Hospital Trust Tower Providence, RI 02903	<b>Adler, Pollock and Sheeha</b>	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$600.00	

SUBTOTAL of Receipts This Page (optional) .....	\$4,500.00
TOTAL This Period (last page this line number only) .....	.....

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)  
Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
William M. McAllister 38 Georgia Avenue North Kingstown, RI 02852	John Clark Center	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrator		
	Year-to-Date >	\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
J. Robert Pasce 835 Taunton Avenue East Providence, RI 02914	Lahigh Realty	10-18-00	\$800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Year-to-Date >	\$800.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
J. Walsh Richards 5701 Michaels Drive Bethesda, MD 20817	Suburban Mortgage Associa	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mortgage Banker		
	Year-to-Date >	\$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Beulah Friedman 2 East Mill Drive Great Neck, NY 11021		10-13-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Year-to-Date >	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Richard E. Beupre 11 New England Way Lincoln, RI 02865	Chemart Company	10-13-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Year-to-Date >	\$2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Anastasia M. Beupre 11 New England Way Lincoln, RI 02865		10-13-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Year-to-Date >	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
David A. Wanner 6300 East Hummingbird Lane Paradise Valley, AZ 85253	Snyder and Wanner	10-13-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$500.00	

SUBTOTAL of Receipts This Page (optional) . . . . .	>	\$4,800.00
TOTAL This Period (last page this line number only) . . . . .	>	-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Weyland Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
David M. Ryan 358 Broad Street Providence, RI 02907	Health Concepts, LTD	10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C.E.O.		
	Year-to-Date >	\$500.00	
B. Full Name, Mailing Address and ZIP Code Carol Depetrillo 65 Peaked Rock Road Narragansett, RI 02882-3031	Name of Employer Pier Professional Towers	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >	\$500.00	
C. Full Name, Mailing Address and ZIP Code Timothy N. Delorm 80 Forest Avenue Glen Ridge, NJ 07028	Name of Employer Edaw, Inc.	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Landscape Architect		
	Year-to-Date >	\$500.00	
D. Full Name, Mailing Address and ZIP Code Peter Gisolfi 566 Warburton Avenue Hastings-on-Hudson, NY 10706	Name of Employer Peter Gisolfi Associates	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Landscape Architect		
	Year-to-Date >	\$500.00	
E. Full Name, Mailing Address and ZIP Code William J. Quinlan 1321-G South Plymouth Court Chicago, IL 60605	Name of Employer Landscape Forms	Date 10-18-00	Amount this pd. \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Landscape Architect		
	Year-to-Date >	\$250.00	
F. Full Name, Mailing Address and ZIP Code Lee Weintraub 224 Dover Green Staten Island, NY 10312	Name of Employer Landscape Architect Comm	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Landscape Architect		
	Year-to-Date >	\$500.00	
G. Full Name, Mailing Address and ZIP Code Lawrence K. Fish 171 Heath Street Brookline, MA 02187	Name of Employer Citizens Financial Group	Date 10-18-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman		
	Year-to-Date >	\$2,000.00	

SUBTOTAL of Receipts This Page (optional) .....	\$3,750.00
TOTAL This Period (last page this line number only) .....	.....

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)

Weygand Committee

C00344184

<p>A. Full Name, Mailing Address and ZIP Code  <b>Charles F. Arbachesky</b>                      Ten Orchard Lane                      Coits Neck, NJ 07722</p>	<p>Name of Employer  <b>Abtract Company</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      President</p>	<p>Year-to-Date &gt;                      \$1,000.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code  <b>Daniel Asher</b>                      211 E Chicago Avenue #1020                      Chicago, IL 60611</p>	<p>Name of Employer  <b>Kessler/Asher Group</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      Broker</p>	<p>Year-to-Date &gt;                      \$1,000.00</p>	
<p>C. Full Name, Mailing Address and ZIP Code  <b>Markus I. Barth</b>                      2495 Route 1, Suite B                      Lawrenceville, NJ 08648</p>	<p>Name of Employer  <b>Allied Vision Services</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      Ophthalmologist</p>	<p>Year-to-Date &gt;                      \$500.00</p>	
<p>D. Full Name, Mailing Address and ZIP Code  <b>Seth Buchwald</b>                      111 Windsor Road                      Tenafly, NJ 07670</p>	<p>Name of Employer  <b>Sanford Barnstein</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      Vice President</p>	<p>Year-to-Date &gt;                      \$250.00</p>	
<p>E. Full Name, Mailing Address and ZIP Code  <b>Gail B. Kaplan</b>                      871 Rosedale Road                      Princeton, NJ 08540</p>	<p>Name of Employer</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      Homemaker</p>	<p>Year-to-Date &gt;                      \$1,000.00</p>	
<p>F. Full Name, Mailing Address and ZIP Code  <b>Robert M. Kargman</b>                      248 Dudley Street                      Brookline, MA 02146</p>	<p>Name of Employer  <b>Tremont Ventures</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      President</p>	<p>Year-to-Date &gt;                      \$1,000.00</p>	
<p>G. Full Name, Mailing Address and ZIP Code  <b>Stuart H. Lubow</b>                      P.O. Box 442                      Mill Neck, NY 11765</p>	<p>Name of Employer  <b>CSB Bank</b></p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation                      President</p>	<p>Year-to-Date &gt;                      \$250.00</p>	
<p>SUBTOTAL of Receipts This Page (optional) &gt;</p>			<p>\$5,000.00</p>
<p>TOTAL This Period (last page this line number only) &gt;</p>			<p>-----</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

**Weygand Committee**

**C00344184**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Saymour H. Malamed</b> 301 West 57th Street, Suite 25E New York, NY 10019		10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Year-to-Date >		\$500.00
<b>David Nasatir</b> 16 Dechart Road Conshohocken, PA 19428	<b>Obermayer, Rebann, Maxwell</b>	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >		\$250.00
<b>Steven Pfeiffer</b> 1448 14th Street Lakewood, NJ 08701	<b>Levin, Shea, Pfeiffer</b>	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >		\$250.00
<b>Joseph I. Rosenbaum</b> 500 2nd Street Lakewood, NJ 08701	<b>Madison Title Agency</b>	10-18-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Year-to-Date >		\$1,000.00
<b>Henry Rosenberg</b> 723 7th Avenue, 7th Floor New York, NY 10019	<b>Self-employed</b>	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >		\$250.00
<b>Raymond F. Shea Jr.</b> 2105 West County Line Road Jackson, NJ 08527	<b>Levin, Shea, Pfeiffer</b>	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >		\$250.00
<b>Ronald H. Janis</b> P.O. Box 647 Ridgewood, NJ 07451-0647	<b>Pitney, Hardin, Kipp and</b>	10-18-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law		
	Year-to-Date >		\$250.00

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	>	<b>\$2,750.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	>	-----



Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Weygard Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
David L. Gannold 525 South Flager Drive West Palm Beach, FL 33401		10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date >	\$500.00
B. Full Name, Mailing Address and ZIP Code Paul S. Kelly 451 Victory Highway North Scituate, RI 02886	Name of Employer Merrill Lynch	Date 10-13-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Year-to-Date >	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Lisa A. Baron 5950 Deloache Avenue Dallas, TX 75225	Name of Employer Baron and Budd	Date 10-18-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law	Year-to-Date >	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Richard I. Nemeroff 4702 Cole Avenue, #1008 Dallas, TX 75205	Name of Employer Baron and Budd	Date 10-18-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law	Year-to-Date >	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Denise K. Quinn 1120 20th Street, Suite 800 Washington, DC 20036	Name of Employer	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Year-to-Date >	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Mary Canning 11 Jason's Grant Drive Cumberland, RI 02864	Name of Employer	Date 10-16-00	Amount this pd. \$975.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Year-to-Date >	\$2,000.00
G. Full Name, Mailing Address and ZIP Code Patrick J. Canning 11 Jason's Grant Drive Cumberland, RI 02864	Name of Employer KPMG, Inc.	Date 10-16-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C.P.A.	Year-to-Date >	\$1,000.00
SUBTOTAL of Receipts This Page (optional) >			\$5,975.00
TOTAL This Period (last page this line number only) >			-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Waygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
William J. Gilbane Jr. 140 Adams Point Road Barrington, RI 02806	Gilbane Building Company	10-16-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Year-to-Date >	\$1,000.00
B. Full Name, Mailing Address and ZIP Code William P. McKenna 78 Norwood Avenue Cranston, RI 02906	Name of Employer State of Rhode Island	Date 10-17-00	Amount this pd. \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant	Year-to-Date >	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Bruce A. Beauchamp 495 Congdon Hill Road Saunderstown, RI 02874	Name of Employer Narragansett Improvement	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Year-to-Date >	\$2,000.00
D. Full Name, Mailing Address and ZIP Code Eugene S. Goldstein 189 Governor Street, Suite 102 Providence, RI 02906	Name of Employer E.S. Goldstein and Associ	Date 10-18-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Year-to-Date >	\$500.00
E. Full Name, Mailing Address and ZIP Code Harold I. Schein One Richmond Square Providence, RI 02906	Name of Employer Self-employed	Date 10-17-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Developer	Year-to-Date >	\$1,750.00
F. Full Name, Mailing Address and ZIP Code Edward D. Feldstein 350 Taber Avenue Providence, RI 02906	Name of Employer Roberts, Carroll, Feldste	Date 10-10-00	Amount this pd. \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney at Law	Year-to-Date >	\$500.00
G. Full Name, Mailing Address and ZIP Code Hannel Waxler Allen and Collins 387 Atwells Avenue Providence, RI 02909	Name of Employer	Date 10-17-00	Amount this pd. \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	PARTNERSHIP ATTRIBUTED SEE BELOW
SUBTOTAL of Receipts This Page (optional) ..... >			\$4,700.00
TOTAL This Period (last page this line number only) ..... >			-----

Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full) **Weygand Committee** C00344184

<p>A. Full Name, Mailing Address and ZIP Code <b>John L. Collins</b> 39 Ryder Lane Marion, MA 02738-1561</p>	<p>Name of Employer <b>Hamel, Waxler, Allen and</b></p>	<p>Date <b>10-17-00</b></p>	<p>Amount this pd. <b>\$500.00</b> <b>ATTRIBUTION</b> <b>MEMO</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <b>Attorney at Law</b></p>	<p>Year-to-Date &gt; <b>\$500.00</b></p>	
<p>B. Full Name, Mailing Address and ZIP Code <b>David H. Waxler</b> 28 Straford Drive North Dartmouth, MA 02747</p>	<p>Name of Employer <b>Hamel, Waxler, Allen and</b></p>	<p>Date <b>10-17-00</b></p>	<p>Amount this pd. <b>\$500.00</b> <b>ATTRIBUTION</b> <b>MEMO</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <b>Attorney at Law</b></p>	<p>Year-to-Date &gt; <b>\$500.00</b></p>	
<p>C. Full Name, Mailing Address and ZIP Code <b>Girardi and Keese</b> 1128 Wilshire Boulevard Los Angeles, CA 90017</p>	<p>Name of Employer</p>	<p>Date <b>10-17-00</b></p>	<p>Amount this pd. <b>\$1,000.00</b> <b>PARTNERSHIP</b> <b>ATTRIBUTED</b> <b>SEE BELOW</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Year-to-Date &gt; <b>\$1,500.00</b></p>	
<p>D. Full Name, Mailing Address and ZIP Code <b>Thomas V. Girardi</b> 1126 Wilshire Boulevard Los Angeles, CA 90017</p>	<p>Name of Employer <b>Girardi and Keese</b></p>	<p>Date <b>10-17-00</b></p>	<p>Amount this pd. <b>\$1,000.00</b> <b>ATTRIBUTION</b> <b>MEMO</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <b>Attorney at Law</b></p>	<p>Year-to-Date &gt; <b>\$1,500.00</b></p>	
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount this pd.</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Year-to-Date &gt;</p>	
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount this pd.</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Year-to-Date &gt;</p>	
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount this pd.</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Year-to-Date &gt;</p>	
<p>SUBTOTAL of Receipts This Page (optional) &gt;</p>			<p><b>\$1,000.00</b></p>
<p>TOTAL This Period (last page this line number only) &gt;</p>			<p><b>\$70,225.00</b></p>

Contributions from Other Political Committees

FOR LINE NUMBER 11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full) **Waygand Committee** C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Corvess for Representative</b> 234 Lexington Avenue North Providence, RI 02904		10-03-00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Brotherhood of Locomotive Engineers PAC Fund</b> 1370 Ontario Street Cleveland, OH 44113-1702		10-05-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>MEBA PAF</b> 444 North Capitol Street, N.W., Suite 800 Washington, DC 20001		10-05-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$2,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>RI Bricklayers PAC</b> 180 Midway Road Cransford, RI 02920		10-05-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$1,500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Friends of Higher Education PAC</b> P.O. Box 85125 Washington, DC 20035		10-10-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Sallie Mae inc. Political Action Committee</b> 11600 Sallie Mae Drive Reston, VA 20190		10-10-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Graziano for Senate Committee</b> 42 Rowley Street Providence, RI 02909		10-10-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Year-to-Date >	\$100.00
SUBTOTAL of Receipts This Page (optional) >			\$4,350.00
TOTAL This Period (last page this line number only) >			-----

Contributions from Other Political Committees

FOR LINE NUMBER 11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full) **Waygand Committee** C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
<b>Hispanic Unity USA</b> 9531 Via Ricardo Los Angeles, CA 91504		10-10-00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$2,000.00	
<b>NACDS Political Action Committee</b> 413 North Lee Street Alexandria, VA 22314		10-10-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$1,000.00	
<b>Physical Therapy Political Action Committee</b> 1111 North Fairfax Street Alexandria, VA 22314		10-10-00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$4,000.00	
<b>Fulbright and Jaworski L.L.P. Federal Committee</b> 1301 McKinney Suite 5100 Houston, TX 77010-3095		10-10-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$1,000.00	
<b>American Health Care Association-PAC</b> 1201 L Street NW Washington, DC 20005		10-06-00 10-18-00	\$500.00 \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$1,500.00	
<b>United Space Alliance PAC</b> 1150 Gemini Avenue Houston, TX 77058		10-06-00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$1,000.00	
<b>Pascrell For Congress</b> 83 Quartz Lane Patterson, NJ 07501		10-12-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >	\$500.00	

SUBTOTAL of Receipts This Page (optional) . . . . . >	\$8,500.00
TOTAL This Period (last page this line number only) . . . . . >	-----

Contributions from Other Political Committees

FOR LINE NUMBER  
11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)		C00344184		
<b>A. Full Name, Mailing Address and ZIP Code</b> NRLCA Political Action Committee 1630 Duke Street, 4th Floor Alexandria, VA 22314-3465		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-12-00	\$2,500.00
		Year-to-Date >		\$2,500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> U.A. Political Education Committee 901 Massachusetts Avenue, N.W. Washington, DC 20001		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-12-00	\$2,000.00
		Year-to-Date >		\$7,500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> The Ann Arbor National PAC 24 Frank Lloyd Wright Drive, P.O. Box 428 Ann Arbor, MI 48106		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-17-00	\$1,000.00
		Year-to-Date >		\$5,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> American Sugar Cane League PAC P.O. Drawer 938 Thibodaux, LA 70302		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-17-00	\$500.00
		Year-to-Date >		\$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Floride Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-17-00	\$1,000.00
		Year-to-Date >		\$1,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> CVS Corporation Federal PAC One CVS Drive Woonsocket, RI 02896		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-17-00	\$1,000.00
		Year-to-Date >		\$2,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Dealers Election Action Committee 8400 Westpark Drive McLean, VA 22102		Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	10-17-00	\$2,500.00
		Year-to-Date >		\$2,500.00
<b>SUBTOTAL of Receipts This Page (optional)</b> ..... >				\$10,500.00
<b>TOTAL This Period (last page this line number only)</b> ..... >				-----

Contributions from Other Political Committees

FOR LINE NUMBER  
11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full) **Weygand Committee** C00344184

A. Full Name, Mailing Address and ZIP Code <b>UWUA Political Contributions Committee</b> 815 - 16th Street, N.W., Suite 605 Washington, DC 20006	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-17-00	\$2,000.00
Year-to-Date > \$5,000.00			
B. Full Name, Mailing Address and ZIP Code <b>PAGE PEPICOPE Funds</b> P.O. Box 1475 Nashville, TN 37202	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-17-00	\$2,000.00
Year-to-Date > \$6,000.00			
C. Full Name, Mailing Address and ZIP Code <b>Transport Workers Union Political Cont. Comm.</b> 80 West End Avenue New York, NY 10023	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-17-00	\$6,000.00
Year-to-Date > \$5,000.00			
D. Full Name, Mailing Address and ZIP Code <b>Dun and Bradstreet Corporation PAC</b> 1001 G Street, N.W., Suite 300-E Washington, DC 20001	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-17-00	\$1,000.00
Year-to-Date > \$1,000.00			
E. Full Name, Mailing Address and ZIP Code <b>Community Action Program PAC</b> 2100 M. Street, North West, Suite 604 Washington, DC 20037-1207	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-18-00	\$2,500.00
Year-to-Date > \$10,000.00			
F. Full Name, Mailing Address and ZIP Code <b>AKAKA IN 2000</b> P.O. Box 3169 Honolulu, HI 96802	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-18-00	\$500.00
Year-to-Date > \$500.00			
G. Full Name, Mailing Address and ZIP Code <b>UNITE Campaign Committee</b> 1710 Broadway New York, NY 10019	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10-18-00	\$1,500.00
Year-to-Date > \$3,000.00			

SUBTOTAL of Receipts This Page (optional) ..... >	\$14,500.00
TOTAL This Period (last page this line number only) ..... >	-----

Contributions from Other Political Committees

FOR LINE NUMBER

11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full) **Weygand Committee** C00344184

<p>A. Full Name, Mailing Address and ZIP Code  <b>Committee to Elect Stephen D. Alves</b>                      34 Sweet Briar Lane                      West Warwick, RI 02893</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$100.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$100.00</p>		
<p>B. Full Name, Mailing Address and ZIP Code  <b>Joseph S. Burchfield Committee</b>                      52 Ambrose Street                      North Providence, RI 02904</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$100.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$100.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code  <b>Friends of Wally Falag</b>                      51 Overhill Road                      Warren, RI 02885-2906</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$100.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$150.00</p>		
<p>D. Full Name, Mailing Address and ZIP Code  <b>PAC of the American Assoc. of Orthopaedic Surgeo</b>                      317 Massachusetts Avenue N.E.                      Washington, DC 20002</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$2,000.00</p>		
<p>E. Full Name, Mailing Address and ZIP Code  <b>GTE PAC</b>                      1850 M Street, North West, Suite 1200                      Washington, DC 20036</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$2,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$2,000.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code  <b>NAIFAPAC</b>                      2901 Teleslar Court                      Falls Church, VA 22042</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$2,500.00</p>		
<p>G. Full Name, Mailing Address and ZIP Code  <b>RI State Right to Life PAC - Federal</b>                      266 Smith Street                      Providence, RI 02908</p>	<p>Name of Employer                      _____                      Occupation                      _____</p>	<p>Date                      10-18-00</p>	<p>Amount this pd.                      \$200.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify): _____</p>	<p>Year-to-Date &gt; \$375.00</p>		
<p>SUBTOTAL of Receipts This Page (optional) &gt;</p>			<p>\$6,000.00</p>
<p>TOTAL This Period (last page this line number only) &gt;</p>			<p>-----</p>



Contributions from Other Political Committees

FOR LINE NUMBER 11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Weygand Committee

C00344184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Blumensauer For Congress P.O. Box 1386 Portland, OR 97207		10-13-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
ENT PAC One Prince Street Alexandria, VA 22314		10-13-00	\$1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		\$2,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
The NEA Fund For Children and Public Education 1201 16th Street, North West Washington, DC 20036		10-13-00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		\$5,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
WIN-PAC 2020 Pennsylvania Avenue, North West, Suite 271 Washington, DC 20008		10-18-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
American Collectors Association 4040 West 70th Street Minneapolis, MN 55436		10-18-00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Year-to-Date >		

SUBTOTAL of Receipts This Page (optional) .....	\$9,500.00
TOTAL This Period (last page this line number only) .....	\$53,350.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full) **Weygand Committee** ID NUMBER **G00344184**

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
Citizens Bank One Citizens Plaza Providence, RI 02903	Bank Charges	10-02-00	\$18.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	Payroll Taxes	10-06-00	\$5,266.89
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	Bank Charges	10-06-00	\$18.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Timothy J. Del Giudice 61 Chapin Avenue Warwick, RI 02889	Payroll	10-06-00	\$573.49
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Michelle DiBiaio 1707 Plainfield Pike Johnston, RI 02918	Payroll	10-06-00	\$884.35
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Amy Gabarra 31 East George Street Providence, RI 02908	Payroll	10-06-00	\$904.31
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Seth M. Klaiman 44 Wayland Trail Narragansett, RI 02882	Travel	10-02-00	\$223.20
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	Payroll	10-06-00	\$984.85
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Timothy M. Welsh 41 Sheffield Avenue Providence, RI 02911	Payroll	10-08-00	\$1,028.68
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) .....	\$9,691.57
TOTAL This Period (last page this line number only) .....	.....

Operating Expenditures

FOR LINE NUMBER  
17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
Federal Express P.O. Box 1140 Memphis, TN 38101-1140	Delivery Services For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-18-00	\$75.54
B. Full Name, Address and ZIP Code MCI P.O. Box 85053 Louisville, KY 40285	Purpose of Disbursement Telephone For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$142.94
C. Full Name, Address and ZIP Code American Speedy Printing Centers 635 Arnold Road Coventry, RI 02818	Purpose of Disbursement Printing For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$3,427.58
D. Full Name, Address and ZIP Code Trippi McMahon and Squier 801 North Fairfax Street Alexandria, VA 22314	Purpose of Disbursement Consultant For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$73,965.00
E. Full Name, Address and ZIP Code  (same as above)	Purpose of Disbursement Consultant For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-06-00	\$77,320.00
F. Full Name, Address and ZIP Code W.B. Mason Company Inc. 99 Bald Hill Road Cranston, RI 02920	Purpose of Disbursement Supplies For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$707.55
G. Full Name, Address and ZIP Code Petty Cash P.O. Box 7818 Warwick, RI 02887-7818	Purpose of Disbursement Miscellaneous For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$89.25
H. Full Name, Address and ZIP Code Paychex Inc. 501 Wampanoag Trail East Providence, RI 02915	Purpose of Disbursement Payroll Expenses For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-10-00	\$99.48
I. Full Name, Address and ZIP Code Jean Duffy Box 603250 Providence, RI 02906	Purpose of Disbursement Photography For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-06-00	\$100.00

SUBTOTAL of Disbursements This Page (optional) ..... > \$155,937.34

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

PAGE 3 OF 5

**Operating Expenditures**

FOR LINE NUMBER  
17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full) **Weygand Committee** C00344184

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
<b>Bennett Pette and Blumenthal</b> 1010 Wisconsin Avenue, N.W. Washington, DC 20007	<b>Consultant</b>	10-06-00	\$21,300.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>Card Service International</b> 43 Jefferson Boulevard Warwick, RI 02888	<b>Bank Charges</b>	10-01-00	\$0.66
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>James M. Russo</b> 15 Gibbs Street East Providence, RI 02916	<b>Travel</b>	10-02-00	\$14.75
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>(same as above)</b>	<b>Payroll</b>	10-06-00	\$2,197.38
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>(same as above)</b>	<b>Food and Beverage</b>	10-05-00	\$105.03
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>Gateway Woodside Inc.</b> Garden City Shopping Center Los Angeles, CA 90074-5770	<b>Rent</b>	10-02-00	\$2,400.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>Baker Telecommunications</b> 16 Broadview Avenue Cumberland, RI 02864	<b>Telephone</b>	10-02-00	\$188.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>Narragansett Electric</b> 280 Malrose Street Providence, RI 02901-1438	<b>Utilities</b>	10-02-00	\$256.01
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
<b>Terrence C. Donlon</b> 36 Conch Road Narragansett, RI 02882	<b>Payroll</b>	10-08-00	\$2,076.06
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) >	\$29,047.88
TOTAL This Period (last page this line number only) >	-----

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)  
Weygant Committee

C00344184

A. Full Name, Address and ZIP Code	Purpose of Disbursement Telephone	Date	Amount
Verizon Wireless P.O. Box 489 Newark, NJ 07101-0489	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$1,274.35
B. Full Name, Address and ZIP Code Circuit City Garden City Cranston, RI 02920	Purpose of Disbursement Office Equipment For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$331.89
C. Full Name, Address and ZIP Code Verizon P.O. Box 28007 Lehigh Valley, PA 18002-8007	Purpose of Disbursement Telephone For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$1,532.79
D. Full Name, Address and ZIP Code  (same as above)	Purpose of Disbursement Telephone For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$351.50
E. Full Name, Address and ZIP Code Gallery Salon 1445 Mineral Spring Avenue North Providence, RI 02904	Purpose of Disbursement Make-up For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-08-00	\$40.00
F. Full Name, Address and ZIP Code Michael K. Gullfoyle 155 Sunbury Street Providence, RI 02903	Purpose of Disbursement Telephone For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00	\$100.00
G. Full Name, Address and ZIP Code  (same as above)	Purpose of Disbursement Payroll For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-08-00	\$1,046.28
H. Full Name, Address and ZIP Code Andrew E. Galli 35 Deborah Street Providence, RI 02909	Purpose of Disbursement Photocopies, Payroll For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-02-00 10-08-00	\$22.65 \$704.70
I. Full Name, Address and ZIP Code China Inn 285 Main Street Pawtucket, RI 02860	Purpose of Disbursement Food and Beverage For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-08-00	\$684.80

SUBTOTAL of Disbursements This Page (optional) >

\$6,088.75

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

-----

Operating Expenditures

FOR LINE NUMBER  
17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Weygand Committee

C00344184

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
William A. Roberts 3540 Reservoir Road, N.W. Washington, DC 20007-2362	Event related costs For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	10-05-00	\$95.00 IN-KIND RECEIVED
B. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
UNITEMIZED DISBURSEMENTS	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		\$488.75
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) .....	>	\$583.76
TOTAL This Period (last page this line number only) .....	>	\$201,349.29

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Refunds to Individuals/Persons**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

**NAME OF COMMITTEE (in Full)**  
**Weygard Committee**

**C00344184**

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
<b>Seminole Tribe of Florida</b> <b>6300 Stirling Road</b> <b>Hollywood, FL 33014</b>	<b>Refund of excess contribution</b> For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	<b>10-18-00</b>	<b>\$1,000.00</b>
	Purpose of Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
B. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	<b>\$1,000.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	<b>\$1,000.00</b>

