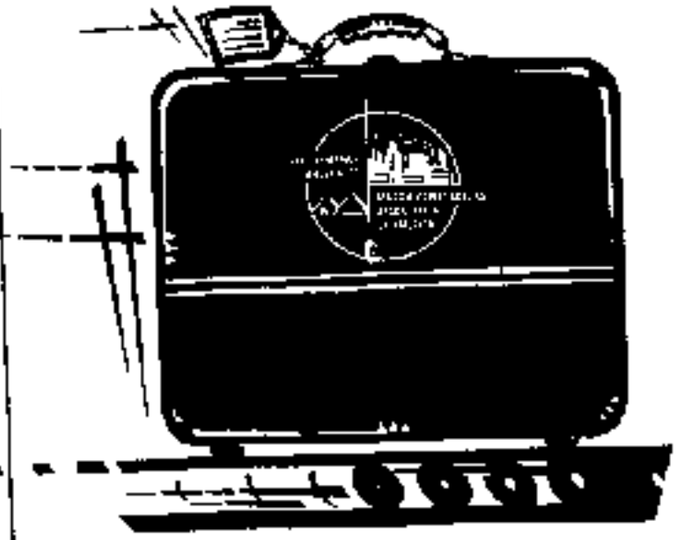
We Have Moved

as of July 31st 1997
Mason Contractors Association of America and Masonry Magazine have moved its offices to:

1910 South Highland Avenue, Suite 101
Lombard, Illinois 60148
Phone: 630 705 4200
Fax: 630 705 4209

Our 800 number will remain 800 536 2225



RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 3 12 39 PM '97

August 27, 1997

Ms. Jennifer K Wall
Reports Analyst
Federal Election Commission
Washington, DC 20463

Dear Ms. Wall:

Enclosed are amended returns per your letters dated 8-13-97. No totals are changed. Only sub-totals were inserted. I have hi-lited changes.

Please note our new mailing address:

1910 Highland Ave.
Lombard, IL 60148

Sincerely,

Liz Fidoruk
Controller

MASON CONTRACTORS ASSOCIATION OF AMERICA
1910 SOUTH HIGHLAND AVENUE • SUITE 101 • LOMBARD, IL 60148 • PHONE 630/705-4200 • FAX 630/705-4209

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2 SEP 3 12 39 PM '97

AUG 13 1997

Liz Fidoruk, Treasurer
MCAAPAC
1550 Spring Road, Suite 320
Oak Brook, IL 60521

Identification Number: C00291799

Reference: July Quarterly Report (4/1/96-6/30/96)

Dear Ms. Fidoruk:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Please provide the total(s) for Line 21(c), Columns A and B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

Jennifer K. Wall

Jennifer K. Wall
Reports Analyst
Reports Analysis Division

252

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 3 12 39 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
[illegible]
LIZ FIDDICK
MCARTHUR
[illegible] STERLING ROAD SUITE 320
[illegible] IL 60521
[illegible]

Initial

2. FEC IDENTIFICATION NUMBER

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

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[X] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [X] YES [ ] NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 4-1-96 through 6-30-96		
6. (a)	Cash on Hand January 1, 19 96		$ 893.36
(b)	Cash on Hand at Beginning of Reporting Period	$ 4363.36	
(c)	Total Receipts (from Line 19)	$ 2150.00	$ 5700.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 6513.36	$ 6593.36
7.	Total Disbursements (from Line 30)	$ 1625.85	$ 1705.85
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 4887.51	$ 4887.51
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Liz Fiddick

Signature of Treasurer
Liz Fiddick

Date
8-27-97

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

FEC FORM 3X
(revised 9/92)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: MCAA PAC

REPORT COVERING PERIOD FROM 4-1-96 TO: 6-30-96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1650.00	2900.00	11(a)(i)
ii. Unitemized	500.00	3800.00	11(a)(ii)
iii. Total (add i and ii) ➤	2150.00	5700.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	2150.00	5700.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2150.00	5700.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	2150.00	5700.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	875.85	955.85	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	875.85	955.85	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	750.00	750.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	1625.85	1705.85	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	1625.85	1705.85	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2150.00	5700.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2150.00	5700.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	1625.85	1705.85	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	1625.85	1705.85	37

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(a)i.

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)

MCAA PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
JOHN J. SMITH 3400 BRIDGEGATE DRIVE JUPITER, FL 33477 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	JOHN SMITH MASONRY ST. LOUIS, MO Occupation SELF-EMPLOYED MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	4-25-96	$ 500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
TERRENCE MULLIGAN 1360 W. DOWNER PL. AURORA, IL 60506 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	MULLIGAN MASONRY AURORA, IL Occupation SELF-EMPLOYED MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	4-25-96	$ 500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
PAUL A. CLEMENTS 4310 ALTON RD. LOUISVILLE, KY 40207 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	MASONOMICS LOUISVILLE, KY Occupation SELF-EMPLOYED CONTRACTOR Aggregate Year-to-Date > $ 500.00	4-26-96	$ 500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD C. MATTHEWS 457 TOWNCREST DR. BEAVERCREEK, OH 45434-5735 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KMCO MIAMISBURG, OH Occupation SELF-EMPLOYED CONTRACTOR Aggregate Year-to-Date > $ 400.00	4-21-96	$ 150.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional) 1650.00

TOTAL This Period (last page this line number only) 1650.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 21 b

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)

MCAAPAC

A. Full Name, Mailing Address and ZIP Code MASON CONTRACTORS ASSOC 1550 SPRING RD. #320 OAK BROOK IL 60521	Purpose of Disbursement FOR PAC RECEPTION REFUND EXPENSES Disbursement for: ☐ Primary ☐ General ☒ Other (specify) RECEPTION	Date (month, day, year) 4-3-96	Amount of Each Disbursement This Period $800.85
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	800.85
TOTAL This Period (last page this line number only)	800.85

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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)

MCAAPAC CASS BALLENGER

A. Full Name, Mailing Address and ZIP Code BALLENGER FOR CONGRESS COMMITTEE P.O. BOX 2552 HICKORY NC 28603	Purpose of Disbursement DIST 10 HOUSE OF REP, NORTH CAROLINA $500 Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 4-26-96	Amount of Each Disbursement This Period $500.00
B. Full Name, Mailing Address and ZIP Code ANNE NORTHUP FOR CONGRESS P.O. BOX 7313 LOUISVILLE, KY 40257	Purpose of Disbursement RUNNING ~~SENATE REP~~ CONGRESS US SENATE KY 3RD CONG. DISTRICT $250 Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 4-23-96	Amount of Each Disbursement This Period $250.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	750.00
TOTAL This Period (last page this line number only)	750.00

FESAN058

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.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 8-27-97
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

SES

PREPARER

9-3-97

DATE PREPARED

FEC FORM 70-2 (12/92)