

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 128

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)

Int'l Union of Bricklayers and Allied Craftworkers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Savage, Mark, , ,

Mailing Address 1147 Hawkstone Ln

City
Saint LouisState
MOZip Code
63125-4611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAC ADC Of E.MOOccupation (for Individual)
Field Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.60

Date of Receipt

M M	D D	Y Y Y Y
08	23	2019

Transaction ID : 16614558

Amount of Each Receipt this Period

57.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scarano, Gerard, , ,

Mailing Address 3 Rogers Rd

City
Old BridgeState
NJZip Code
08857-1625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IU Of Bricklayers & Allied CraftworkerOccupation (for Individual)
Executive VP-Board

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2064.36

Date of Receipt

M M	D D	Y Y Y Y
08	02	2019

Transaction ID : 16614372

Amount of Each Receipt this Period

242.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scavone, Anthony, , ,

Mailing Address 4412 Wall Rd

City
Port HuronState
MIZip Code
48060-2448FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAC Local 02 MIOccupation (for Individual)
Field Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

572.70

Date of Receipt

M M	D D	Y Y Y Y
08	20	2019

Transaction ID : 16614538

Amount of Each Receipt this Period

83.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

383.52

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