

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 87

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Head, Glenn, , ,**

Mailing Address 7301 Decatur Rd

City  
Fort Wayne

State  
IN

Zip Code  
46816-3945

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAC Local 04 IN/KY

Occupation (for Individual)  
Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.96

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 27 / 2020

**Transaction ID : 17097796**

Amount of Each Receipt this Period

68.40

☐ Memo Item

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

**B. Henry, Heath, , ,**

Mailing Address 908 Jolly Rd

City  
Wellston

State  
OH

Zip Code  
45692-9219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAC Local 97 OH

Occupation (for Individual)  
Recording Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2020

**Transaction ID : 17097879**

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

**C. Herzog, Shawn, , ,**

Mailing Address 7671 Remmick Ln

City  
Dayton

State  
OH

Zip Code  
45424-2154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAC Local 97 OH

Occupation (for Individual)  
Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2020

**Transaction ID : 17097880**

Amount of Each Receipt this Period

57.50

☐ Memo Item

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

240.90

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