

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

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

FOR LINE NUMBER: PAGE 6 OF 6
(check only one)

<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			

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NAME OF COMMITTEE (In Full)

Building and Restoring America Together Political Action Committee

A. Rastin, Thomas, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 243 City Mount Vernon State OH Zip Code 43050 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Ariel Foundation Occupation (for Individual) VP Marketing & Engineering Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 10 / 2018 Transaction ID : SA11AI.4351 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item
B. Wright, KB, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 243 City Mount Vernon State OH Zip Code 43050 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Ariel Corp Occupation (for Individual) Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2018 Transaction ID : SA11AI.4354 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item
C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼			Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period <input type="checkbox"/> Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			10000.00
TOTAL This Period (last page this line number only)..... ▶			10000.00