

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 553 OF 2243  
(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)

**HNTB Holdings Ltd. PAC**

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

**A. Farrell, Catherine, , ,**Mailing Address 1650 Arch Street  
Suite 1700City  
PhiladelphiaState  
PAZip Code  
19103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB CorporationOccupation (for Individual)  
Department Manager - Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

**Transaction ID : INCA8728**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. Fazio, Joseph, , ,**Mailing Address 680 American Avenue  
Suite 100City  
King Of PrussiaState  
PAZip Code  
19406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB CorporationOccupation (for Individual)  
Division Delivery Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

**Transaction ID : INCA8910**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Fehnel, Scott, , ,**

Mailing Address 715 Kirk Drive

City  
Kansas CityState  
MOZip Code  
64105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB CorporationOccupation (for Individual)  
Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

**Transaction ID : INCA9091**

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

100.00

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