

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Stover, Brian, , ,**

Mailing Address 2900 South Quincy Street  
Suite 600

City  
Arlington

State  
VA

Zip Code  
22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB CORPORATION

Occupation (for Individual)  
Sr Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

MM / DD / YYYY  
01 / 04 / 2019

**Transaction ID : INCA463**

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

**B. Strauss, Kip, , ,**

Mailing Address 715 Kirk Drive

City  
Kansas City

State  
MO

Zip Code  
64105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB CORPORATION

Occupation (for Individual)  
Sr Project Manager - Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
01 / 04 / 2019

**Transaction ID : INCA464**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Stromsted, Robert, , ,**

Mailing Address Empire State Building  
350 Fifth Avenue, 57th Floor

City  
New York

State  
NY

Zip Code  
10118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HNTB Corporation

Occupation (for Individual)  
National Pursuit Champion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

MM / DD / YYYY  
01 / 04 / 2019

**Transaction ID : INCA465**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

190.00