

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 813 OF 1869

(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. Shelton, Michael, , ,**

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)  
Practice Leader - Architecture

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
03	/	15	/	2019

**Transaction ID : INCA3398**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Shkurti, Tony, , ,**Mailing Address One South Wacker Drive  
Suite 900City  
ChicagoState  
ILZip Code  
60606FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2019

**Transaction ID : INCA3427**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Siegel, Jeffrey, , ,**Mailing Address One South Wacker Drive  
Suite 900City  
ChicagoState  
ILZip Code  
60606FEC ID number of contributing  
federal political committee.

C

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

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
03	/	15	/	2019

**Transaction ID : INCA3399**

Amount of Each Receipt this Period

20.00

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

65.00

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