

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

FOR LINE NUMBER: PAGE 1310 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. Henderson, Dennis, , ,**Mailing Address 401 B Street  
Suite 510City  
San DiegoState  
CAZip Code  
92101FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M	D D	Y Y Y Y
05	10	2019

**Transaction ID : INCA5714**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Henke, Randy, , ,**Mailing Address 31 St. James Ave.  
Suite 300City  
BostonState  
MAZip Code  
2116FEC 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 ▼

780.00

Date of Receipt

M M	D D	Y Y Y Y
05	10	2019

**Transaction ID : INCA5757**

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

**C. Henley, Anthony, , ,**

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 Holdings LtdOccupation (for Individual)  
Database Administrator III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	D D	Y Y Y Y
05	10	2019

**Transaction ID : INCA5530**

Amount of Each Receipt this Period

25.00

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

135.00

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