

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

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

FOR LINE NUMBER: PAGE 1523 OF 1869

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HNTB Holdings Ltd. PAC

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

A. Walker, James, , ,

Mailing Address 7400 West 129th Street
Suite 100

City
Overland Park

State
KS

Zip Code
66213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HNTB Corporation

Occupation (for Individual)
Project Controls Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2019

Transaction ID : INCA6055

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Wallace, Kevin, , ,

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)
Group Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2019

Transaction ID : INCA6056

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Walling, Van, , ,

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)
Office Delivery Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2019

Transaction ID : INCA6190

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

70.00