

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

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

FOR LINE NUMBER: PAGE 71 OF 164

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Granite Construction Inc. Employee PAC - GRANITEPAC**

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

**A. Johnson, Charles R., , ,**

Mailing Address P.O. Box 50085

City  
Watsonville

State  
CA

Zip Code  
95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Granite Construction, Inc.

Occupation (for Individual)  
Senior Estimator, Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2017

**Transaction ID : INCA10267**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. Johnson, Charles R., , ,**

Mailing Address P.O. Box 50085

City  
Watsonville

State  
CA

Zip Code  
95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Granite Construction, Inc.

Occupation (for Individual)  
Senior Estimator, Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2017

**Transaction ID : INCA10306**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. Johnson, Charles R., , ,**

Mailing Address P.O. Box 50085

City  
Watsonville

State  
CA

Zip Code  
95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Granite Construction, Inc.

Occupation (for Individual)  
Senior Estimator, Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2017

**Transaction ID : INCA10346**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00