

# **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. 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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

**Transaction ID : INCA17617**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Sweeney, Michael, , ,**

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)

Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

**Transaction ID : INCA17618**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Swenson, Brian, , ,**

Mailing Address 250 East Wisconsin Avenue

Suite 2000

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HNTB Corporation

Occupation (for Individual)

Sr Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

**Transaction ID : INCA17619**

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)..... ►

300.00