

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

HOUSE FREEDOM FUND

ADDRESS (number and street) PO BOX 1948

Check if different than previously reported. (ACC) ALEXANDRIA VA 22313

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00552851

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:
 - April 15 Quarterly Report (Q1)
 - July 15 Quarterly Report (Q2)
 - October 15 Quarterly Report (Q3)
 - January 31 Year-End Report (YE)
 - July 31 Mid-Year Report (Non-election Year Only) (MY)
 - Termination Report (TER)

- (b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input checked="" type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 06 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer BROWN, MEGAN, , ,

Signature of Treasurer BROWN, MEGAN, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		90559.90
(b) Cash on Hand at Beginning of Reporting Period.....	82964.56	
(c) Total Receipts (from Line 19)	90366.10	575630.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	173330.66	666189.90
7. Total Disbursements (from Line 31).....	107111.57	599970.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	66219.09	66219.09
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	67515.00	406535.00
(ii) Unitemized	4673.00	49019.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	72188.00	455554.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	108100.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	89688.00	563654.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	145.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	678.10	11830.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	90366.10	575630.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	90366.10	575630.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	58081.57	178549.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	58081.57	178549.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49030.00	321421.00
24. Independent Expenditures (use Schedule E)	0.00	100000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	107111.57	599970.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107111.57	599970.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	89688.00	563654.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89688.00	563654.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	58081.57	178549.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	145.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	58081.57	178404.81

**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)	PAGE 6 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. BACHMAN, NATHAN, DULANEY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7824 LAUREL AVE
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.9998
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-DAVIDSON-TRANS20160607

B. BACHMAN, NATHAN, DULANEY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7824 LAUREL AVE
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10048
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.9991
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-BLUM-TRANS20160607

SUBTOTAL of Receipts This Page (optional)..... ▶ 7710.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **06 / 01 / 2016**
Transaction ID : SA11AI.10036
 Amount of Each Receipt this Period **10.00**
 Memo Item

B. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **190.00**

Date of Receipt **06 / 01 / 2016**
Transaction ID : SA11AI.9985
 Amount of Each Receipt this Period **10.00**
 Memo Item
EM-GARRETT-TRANS20160607

C. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **06 / 01 / 2016**
Transaction ID : SA11AI.10090
 Amount of Each Receipt this Period **10.00**
 Memo Item
EM-BUDD-TRANS20160607

SUBTOTAL of Receipts This Page (optional)..... **30.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 8 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **180.00**

Date of Receipt **06 / 01 / 2016**
Transaction ID : SA11AI.9979
 Amount of Each Receipt this Period **10.00**
 Memo Item
EM-BRAT-TRANS20160607

B. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **06 / 01 / 2016**
Transaction ID : SA11AI.9988
 Amount of Each Receipt this Period **10.00**
 Memo Item
EM-HUELSKAMP-TRANS20160607

C. BERKSTRESSER, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DEER LN
 City KIRBYVILLE State MO Zip Code 65679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : SA11AI.10371
 Amount of Each Receipt this Period **10.00**
 Memo Item
EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... **30.00**
TOTAL This Period (last page this line number only).....

**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)	PAGE 9 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BERKSTRESSER, CHRISTINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 DEER LN

City KIRBYVILLE	State MO	Zip Code 65679
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
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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
06		30		2016

Transaction ID : SA11AI.10492

Amount of Each Receipt this Period
10.00

Memo Item

B. BERKSTRESSER, CHRISTINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 DEER LN

City KIRBYVILLE	State MO	Zip Code 65679
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.10416

Amount of Each Receipt this Period
10.00

Memo Item
EM-GARRETT-TRANS20160630

C. BHOOMA, PRAMOD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Transaction ID : SA11AI.10067

Amount of Each Receipt this Period
10.00

Memo Item
EM-THOMAS-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Transaction ID : SA11AI.10042

Amount of Each Receipt this Period
10.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SA11AI.10214

Amount of Each Receipt this Period
10.00

Memo Item
EM-THOMAS-TRANS20160614

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SA11AI.10204

Amount of Each Receipt this Period
10.00

Memo Item
EM-CRANE-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BHOOMA, PRAMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2977 CASA NUEVA CT
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNOPSIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10225
 Amount of Each Receipt this Period 10.00
 Memo Item

B. BHOOMA, PRAMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2977 CASA NUEVA CT
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNOPSIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10431
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-BUDD-TRANS20160630

C. BHOOMA, PRAMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2977 CASA NUEVA CT
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNOPSIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10493
 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)..... ▶

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10446

Amount of Each Receipt this Period
5.00

Memo Item
EM-HUELSKAMP-TRANS20160630

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10461

Amount of Each Receipt this Period
5.00

Memo Item
EM-DAVIDSON-TRANS20160630

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10356

Amount of Each Receipt this Period
5.00

Memo Item
EM-BANKS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10372

Amount of Each Receipt this Period
5.00

Memo Item
EM-BLUM-TRANS20160630

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10417

Amount of Each Receipt this Period
5.00

Memo Item
EM-GARRETT-TRANS20160630

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHOOMA, PRAMOD, , ,

Mailing Address 2977 CASA NUEVA CT

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNOPSISYS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10401

Amount of Each Receipt this Period
5.00

Memo Item
EM-CRANE-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 14 OF 159
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
HOUSE FREEDOM FUND

A. BHOOMA, PRAMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2977 CASA NUEVA CT
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNOPSIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10386
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-THOMAS-TRANS20160630

B. BUSSINGER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8205 MOUNT SHASTA CIR
 City FORT WORTH State TX Zip Code 76137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10483
 Amount of Each Receipt this Period 500.00
 Memo Item

C. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10357
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BANKS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10418
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10402
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-CRANE-TRANS20160630

C. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10373
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10387
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-THOMAS-TRANS20160630

B. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10432
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BUDD-TRANS20160630

C. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10447
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 17 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BYRNES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5412 SOLLIE CV
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10462
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

B. CHANDLER, R.F., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 CORNERBROOK PL
 City THE WOODLANDS State TX Zip Code 77381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 06 / 04 / 2016
Transaction ID : SA11AI.10071
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-THOMAS-TRANS20160607

C. CHILDS, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 10 / 2016
Transaction ID : SA11AI.10216
 Amount of Each Receipt this Period 2500.00
 Memo Item
 EM-THOMAS-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	2560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CHILDS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JW CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 06 / 10 / 2016
Transaction ID : SA11AI.10215
 Amount of Each Receipt this Period 2500.00
 Memo Item
 EM-THOMAS-TRANS20160614

B. CHILDS, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22500.00

Date of Receipt
 06 / 10 / 2016
Transaction ID : SA11AI.10208
 Amount of Each Receipt this Period 2500.00
 Memo Item
 EM-BUDD-TRANS20160614

C. CHILDS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JW CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22500.00

Date of Receipt
 06 / 10 / 2016
Transaction ID : SA11AI.10207
 Amount of Each Receipt this Period 2500.00
 Memo Item
 EM-BUDD-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 19 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. COLBERT, THOMAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 320849
 City FLOWOOD State MS Zip Code 39232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY BANCSHARES OF MS Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10082
 Amount of Each Receipt this Period 400.00
 Memo Item
 EM-CRANE-TRANS20160607

B. COUNTS, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 ROB ROY CT
 City FRANKLIN State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELMONT UNIVERSITY COLLEGE OF LAW Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10209
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-BUDD-TRANS20160614

C. COUNTS, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 ROB ROY CT
 City FRANKLIN State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELMONT UNIVERSITY COLLEGE OF LAW Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10217
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-THOMAS-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 20 OF 159
(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)
HOUSE FREEDOM FUND

A. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10358
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-BANKS-TRANS20160630

B. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10433
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-BUDD-TRANS20160630

C. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10403
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-CRANE-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 21 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10448
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

B. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10501
 Amount of Each Receipt this Period 1200.00
 Memo Item

C. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10463
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 1400.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 22 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10419
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10388
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-THOMAS-TRANS20160630

C. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10374
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 23 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CURTIS, R.W., , ,		Date of Receipt
Mailing Address 611 CANDY RD		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2016"/>
City PIPE CREEK	State TX	Zip Code 78063
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10065
Name of Employer (for Individual) SELF		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) MANUFACTURER		<input type="checkbox"/> Memo Item EM-THOMAS-TRANS20160607
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="150.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DEHLIN, MARK, , ,		Date of Receipt
Mailing Address 2796 KINGWOOD PIKE		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City MORGANTOWN	State WV	Zip Code 26508
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10404
Name of Employer (for Individual) MATRIC		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Occupation (for Individual) MANAGER		<input type="checkbox"/> Memo Item EM-CRANE-TRANS20160630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="60.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DEHLIN, MARK, , ,		Date of Receipt
Mailing Address 2796 KINGWOOD PIKE		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City MORGANTOWN	State WV	Zip Code 26508
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10375
Name of Employer (for Individual) MATRIC		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Occupation (for Individual) MANAGER		<input type="checkbox"/> Memo Item EM-BLUM-TRANS20160630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="30.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="80.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 24 OF 159
(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)
HOUSE FREEDOM FUND

A. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10389
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-THOMAS-TRANS20160630

B. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10434
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BUDD-TRANS20160630

C. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10449
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10464
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

B. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10359
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BANKS-TRANS20160630

C. DEHLIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2796 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATRIC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10420
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-GARRETT-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31

City BETHANIA	State NC	Zip Code 27010
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : SA11AI.10196

Amount of Each Receipt this Period
50.00

Memo Item
EM-DAVIDSON-TRANS20160614

B. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31

City BETHANIA	State NC	Zip Code 27010
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : SA11AI.10227

Amount of Each Receipt this Period
100.00

Memo Item

C. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31

City BETHANIA	State NC	Zip Code 27010
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : SA11AI.10205

Amount of Each Receipt this Period
50.00

Memo Item
EM-CRANE-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10195
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BLUM-TRANS20160614

B. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10218
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-THOMAS-TRANS20160614

C. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10201
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BANKS-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10175
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-GARRETT-TRANS20160614

B. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10212
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM- HUELSKAMP-TRANS20160614

C. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.10197
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BRAT-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 29 OF 159
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DESZYCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31
 City BETHANIA State NC Zip Code 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 07 / 2016
Transaction ID : SA11AI.10211
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BUDD-TRANS20160614

B. DOWNEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26000 NEW BRIDGE DR
 City LOS ALTOS HILLS State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESIDENT Occupation (for Individual) ALTOS SONOMA CORP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10481
 Amount of Each Receipt this Period 250.00
 Memo Item

C. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1180.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10095
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BUDD-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 30 OF 159
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FARGHER, LAWRENCE, , ,		Date of Receipt MM / DD / YYYY 06 / 03 / 2016
Mailing Address 830 KIELY BLVD. #200		Transaction ID : SA11AI.9987
City SANTA CLARA	State CA	Zip Code 95051
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer (for Individual) REALCOM ASSOC.	Occupation (for Individual) REALTOR	<input type="checkbox"/> Memo Item EM-GARRETT-TRANS20160607
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FARGHER, LAWRENCE, , ,		Date of Receipt MM / DD / YYYY 06 / 03 / 2016
Mailing Address 830 KIELY BLVD. #200		Transaction ID : SA11AI.9997
City SANTA CLARA	State CA	Zip Code 95051
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer (for Individual) REALCOM ASSOC.	Occupation (for Individual) REALTOR	<input type="checkbox"/> Memo Item EM-DAVIDSON-TRANS20160607
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 945.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FARGHER, LAWRENCE, , ,		Date of Receipt MM / DD / YYYY 06 / 03 / 2016
Mailing Address 830 KIELY BLVD. #200		Transaction ID : SA11AI.10080
City SANTA CLARA	State CA	Zip Code 95051
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer (for Individual) REALCOM ASSOC.	Occupation (for Individual) REALTOR	<input type="checkbox"/> Memo Item EM-CRANE-TRANS20160607
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1130.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.9994
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BLUM-TRANS20160607

B. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.9984
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BANKS-TRANS20160607

C. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.9990
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-HUELSKAMP-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.9981
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BRAT-TRANS20160607

B. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 995.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10045
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FARGHER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 City SANTA CLARA State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALCOM ASSOC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1095.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10068
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-THOMAS-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 33 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FILIP, DANIELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2246 SCHOLARSHIP
 City IRVINE State CA Zip Code 92612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 06 / 05 / 2016
Transaction ID : SA11AI.10219
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-THOMAS-TRANS20160614

B. FITZGERALD, GERALD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 27376
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 27 / 2016
Transaction ID : SA11AI.10480
 Amount of Each Receipt this Period 250.00
 Memo Item

C. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10435
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BUDD-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 34 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10450
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

B. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 155.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10465
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

C. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10360
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BANKS-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10421
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10376
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BLUM-TRANS20160630

C. FLEMING, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12065 FM 1740
 City WICHITA FALLS State TX Zip Code 76305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 95.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10390
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-THOMAS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 36 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FRANSEEN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 TANYARD RD
 City GREENVILLE State SC Zip Code 29609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10220
 Amount of Each Receipt this Period 20.00
 Memo Item
 EM-THOMAS-TRANS20160614

B. FRIEDEL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 ORCHARD LANE
 City GREEN BAY State WI Zip Code 54301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10063
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-THOMAS-TRANS20160607

C. GARRISON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 605
 City SALEM State UT Zip Code 84653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 125.00

Date of Receipt 06 / 05 / 2016
Transaction ID : SA11AI.10213
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM- HUELSKAMP-TRANS20160614

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 37 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. GARRISON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 605
 City SALEM State UT Zip Code 84653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 06 / 05 / 2016
Transaction ID : SA11AI.10210
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-BUDD-TRANS20160614

B. GARRISON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 605
 City SALEM State UT Zip Code 84653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 155.00

Date of Receipt 06 / 05 / 2016
Transaction ID : SA11AI.10221
 Amount of Each Receipt this Period 30.00
 Memo Item
 EM-THOMAS-TRANS20160614

C. GARRISON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 605
 City SALEM State UT Zip Code 84653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 06 / 05 / 2016
Transaction ID : SA11AI.10202
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-BANKS-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. GARRISON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 605
 City SALEM State UT Zip Code 84653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2016
Transaction ID : SA11AI.10198
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-BRAT-TRANS20160614

B. HALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19376 HAZEL RD
 City LEBANON State MO Zip Code 65536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : SA11AI.10508
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. HALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19376 HAZEL RD
 City LEBANON State MO Zip Code 65536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : SA11AI.10391
 Amount of Each Receipt this Period
 15.00
 Memo Item
 EM-THOMAS-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 39 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19376 HAZEL RD
 City LEBANON State MO Zip Code 65536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10405
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-CRANE-TRANS20160630

B. HENDRICKS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 RICHVALE LN
 City HOUSTON State TX Zip Code 77062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAA TEXAS Occupation (for Individual) CLAIMS ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.10341
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-THOMAS-TRANS20160629

C. HENDRICKS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 RICHVALE LN
 City HOUSTON State TX Zip Code 77062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAA TEXAS Occupation (for Individual) CLAIMS ADJUSTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.10340
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-CRANE-TRANS20160629

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HENDRICKS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 RICHVALE LN
 City HOUSTON State TX Zip Code 77062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAA TEXAS Occupation (for Individual) CLAIMS ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.10339
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BUDD-TRANS20160630

B. HENDRICKSON, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 GOLDEN GATE DR
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOKOMIS CAPITAL LLC Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10477
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. HENDRICKSON, CHRISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 GOLDEN GATE DR
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10478
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO	State CA	Zip Code 94590
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.10040

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO	State CA	Zip Code 94590
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.10094

Amount of Each Receipt this Period
50.00

Memo Item
EM-BUDD-TRANS20160607

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO	State CA	Zip Code 94590
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : SA11AI.10222

Amount of Each Receipt this Period
50.00

Memo Item
EM-THOMAS-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 42 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO State CA Zip Code 94590

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 06 / 07 / 2016
Transaction ID : SA11AI.10229

Amount of Each Receipt this Period
 15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO State CA Zip Code 94590

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 435.00

Date of Receipt
 06 / 27 / 2016
Transaction ID : SA11AI.10451

Amount of Each Receipt this Period
 15.00

Memo Item
 EM-HUELSKAMP-TRANS20160630

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO State CA Zip Code 94590

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 06 / 27 / 2016
Transaction ID : SA11AI.10513

Amount of Each Receipt this Period
 15.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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

**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)	PAGE 43 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HINTON, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 MARIPOSA ST
 City VALLEJO State CA Zip Code 94590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 27 / 2016
Transaction ID : SA11AI.10422
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. HOOLEY, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000W-050N
 City LAGRANGE State IN Zip Code 46761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10423
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-GARRETT-TRANS20160630

C. HOOLEY, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000W-050N
 City LAGRANGE State IN Zip Code 46761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10377
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 44 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. JACKSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 SHAY CT
 HIGHLAND
 City HIGHLAND State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10039
 Amount of Each Receipt this Period 35.00
 Memo Item

B. JACKSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 SHAY CT
 HIGHLAND
 City HIGHLAND State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10092
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-BUDD-TRANS20160607

C. JACKSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 SHAY CT
 HIGHLAND
 City HIGHLAND State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10452
 Amount of Each Receipt this Period 35.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 45 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. JACKSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7014 SHAY CT
 HIGHLAND

City HIGHLAND State CA Zip Code 92346

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10517

Amount of Each Receipt this Period
 35.00

Memo Item

B. JORDAN, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2230 NW 59TH AVE

City OCALA State FL Zip Code 34482

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 10.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10424

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-GARRETT-TRANS20160630

C. JORDAN, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2230 NW 59TH AVE

City OCALA State FL Zip Code 34482

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 30.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10466

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-DAVIDSON-TRANS20160630

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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

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

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

FOR LINE NUMBER: PAGE 46 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. JORDAN, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2230 NW 59TH AVE
 City Ocala State FL Zip Code 34482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10453
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

B. KEATS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OAK MEADOW DR
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 04 / 2016
Transaction ID : SA11AI.10081
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-CRANE-TRANS20160607

C. KEATS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OAK MEADOW DR
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 06 / 04 / 2016
Transaction ID : SA11AI.10070
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-THOMAS-TRANS20160607

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

**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)	PAGE 47 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KIRK, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.9986

Amount of Each Receipt this Period
10.00

Memo Item
EM-GARRETT-TRANS20160607

B. KIRK, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.10091

Amount of Each Receipt this Period
10.00

Memo Item
EM-BUDD-TRANS20160607

C. KIRK, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.9980

Amount of Each Receipt this Period
10.00

Memo Item
EM-BRAT-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KIRK, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 60.00

Date of Receipt
 06 / 01 / 2016

Transaction ID : SA11AI.9995

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-DAVIDSON-TRANS20160607

B. KIRK, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 40.00

Date of Receipt
 06 / 01 / 2016

Transaction ID : SA11AI.9989

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-HUELSKAMP-TRANS20160607

C. KIRK, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15080 WELLMAN RD

City WINCHESTER	State KS	Zip Code 66097
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 90.00

Date of Receipt
 06 / 01 / 2016

Transaction ID : SA11AI.10078

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-CRANE-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 49 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KIRK, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15080 WELLMAN RD
 City WINCHESTER State KS Zip Code 66097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.9982
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-BANKS-TRANS20160607

B. KIRK, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15080 WELLMAN RD
 City WINCHESTER State KS Zip Code 66097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.9992
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-BLUM-TRANS20160607

C. KOSCIOLEK, SYLVIA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12228 WOODLINE DR
 City FENTON State MI Zip Code 48430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10484
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 50 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. LARSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 MEADOWLARK LANE
 City RICHMOND State VA Zip Code 23228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEOWNGREET PLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.9978
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-BRAT-TRANS20160607

B. LEHFELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MEADOWVISTA DR APT 727
 City CORPUS CHRISTI State TX Zip Code 78414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10436
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-BUDD-TRANS20160630

C. LEHFELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MEADOWVISTA DR APT 727
 City CORPUS CHRISTI State TX Zip Code 78414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10454
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 51 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. LEHFELD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6301 MEADOWVISTA DR APT 727
City CORPUS CHRISTI State TX Zip Code 78414
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 150.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10467
Amount of Each Receipt this Period 10.00
 Memo Item
EM-DAVIDSON-TRANS20160630

B. LEHFELD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6301 MEADOWVISTA DR APT 727
City CORPUS CHRISTI State TX Zip Code 78414
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 80.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10361
Amount of Each Receipt this Period 10.00
 Memo Item
EM-BANKS-TRANS20160630

C. LEHFELD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6301 MEADOWVISTA DR APT 727
City CORPUS CHRISTI State TX Zip Code 78414
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 120.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10425
Amount of Each Receipt this Period 10.00
 Memo Item
EM-GARRETT-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. LEHFELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MEADOWVISTA DR APT 727

City CORPUS CHRISTI	State TX	Zip Code 78414
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : SA11AI.10392

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-THOMAS-TRANS20160630

B. LEHFELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MEADOWVISTA DR APT 727

City CORPUS CHRISTI	State TX	Zip Code 78414
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 110.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : SA11AI.10406

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-CRANE-TRANS20160630

C. LEHFELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MEADOWVISTA DR APT 727

City CORPUS CHRISTI	State TX	Zip Code 78414
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 90.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : SA11AI.10378

Amount of Each Receipt this Period
 10.00

Memo Item
 EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 53 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10523
 Amount of Each Receipt this Period 15.00
 Memo Item

B. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 185.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10393
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-THOMAS-TRANS20160630

C. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10407
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-CRANE-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 54 OF 159
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
HOUSE FREEDOM FUND

A. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10379
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BLUM-TRANS20160630

B. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10437
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BUDD-TRANS20160630

C. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10455
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10468
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

B. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 155.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10362
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-BANKS-TRANS20160630

C. MAAS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 16TH ST. N.
 City ARLINGTON State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10426
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-GARRETT-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 OF 159 (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

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)
HOUSE FREEDOM FUND

A. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY	State TX	Zip Code 76049
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 60.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10380

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-BLUM-TRANS20160630

B. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY	State TX	Zip Code 76049
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 80.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10438

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-BUDD-TRANS20160630

C. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY	State TX	Zip Code 76049
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10456

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY State TX Zip Code 76049

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 90.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10469

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-DAVIDSON-TRANS20160630

B. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY State TX Zip Code 76049

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 55.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10363

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-BANKS-TRANS20160630

C. MARTIN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 LINDEN CT
 GRANBURY

City GRANBURY State TX Zip Code 76049

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 75.00

Date of Receipt
 06 / 29 / 2016
Transaction ID : SA11AI.10427

Amount of Each Receipt this Period
 5.00

Memo Item
 EM-GARRETT-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 15.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARTIN, RUSSELL, , ,		Date of Receipt
Mailing Address 8502 LINDEN CT GRANBURY		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City GRANBURY	State TX	Zip Code 76049
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10394
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="5.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item EM-THOMAS-TRANS20160630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="65.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARTIN, RUSSELL, , ,		Date of Receipt
Mailing Address 8502 LINDEN CT GRANBURY		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City GRANBURY	State TX	Zip Code 76049
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10408
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="5.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item EM-CRANE-TRANS20160630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="70.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCCREIGHT, SHARON, , ,		Date of Receipt
Mailing Address 7706 ROYAL AZALEA CT		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City SPRINGFIELD	State VA	Zip Code 22153
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10526
Name of Employer (for Individual) HOMEMAKER		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) HOMEMAKER		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="370.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 59 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10439
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-BUDD-TRANS20160630

B. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10409
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-CRANE-TRANS20160630

C. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10381
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-BLUM-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 60 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10395
 Amount of Each Receipt this Period
 5.00
 Memo Item
 EM-THOMAS-TRANS20160630

B. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 35.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10457
 Amount of Each Receipt this Period
 5.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

C. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 5.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10364
 Amount of Each Receipt this Period
 5.00
 Memo Item
 EM-BANKS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 61 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10428
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. MEEKER, TOMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 938 HUNT CT
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10470
 Amount of Each Receipt this Period 5.00
 Memo Item
 EM-DAVIDSON-TRANS20160630

C. MILAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 E 2625 N
 City OGDEN State UT Zip Code 84414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : SA11AI.10348
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
TOTAL This Period (last page this line number only).....▶

**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)	PAGE 62 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MINBIOLE, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 PENNSYLVANIA AVE

City BRYN MAWR	State PA	Zip Code 19010
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E-BEAM SERVICES	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.10528

Amount of Each Receipt this Period
400.00

Memo Item

B. OCHOA, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 MOCKINGBIRD LN

City MANHEIM	State PA	Zip Code 17545
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WELLSPAN-EPHRATA HOSPITAL	Occupation (for Individual) MEDICAL TECHNOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10530

Amount of Each Receipt this Period
160.00

Memo Item

C. PARKER, HAYNES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 HANNAFORD DR

City ROSWELL	State GA	Zip Code 30075
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

Transaction ID : SA11AI.10410

Amount of Each Receipt this Period
35.00

Memo Item
EM-CRANE-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	595.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 63 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PENDERGRASS, COURTNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 MAPLETON RIDGE DR NW
 City CLEVELAND State TN Zip Code 37312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10057
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. PETTIT, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 GLEN VIEW PL
 City BONITA State CA Zip Code 91902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.9996
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-DAVIDSON-TRANS20160607

C. PETTIT, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 GLEN VIEW PL
 City BONITA State CA Zip Code 91902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10079
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-CRANE-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. PETTIT, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 GLEN VIEW PL

City BONITA	State CA	Zip Code 91902
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.10093

Amount of Each Receipt this Period
50.00

Memo Item
EM-BUDD-TRANS20160607

B. PETTIT, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 GLEN VIEW PL

City BONITA	State CA	Zip Code 91902
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.9983

Amount of Each Receipt this Period
50.00

Memo Item
EM-BANKS-TRANS20160607

C. PETTIT, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 GLEN VIEW PL

City BONITA	State CA	Zip Code 91902
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.9993

Amount of Each Receipt this Period
50.00

Memo Item
EM-BLUM-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 159
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PRYOR, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 WESTFIELD DR.
 City CENTERPORT State NY Zip Code 11721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2016
Transaction ID : SA11AI.10173
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-GARRETT-TRANS20160614

B. PRYOR, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 WESTFIELD DR.
 City CENTERPORT State NY Zip Code 11721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2016
Transaction ID : SA11AI.10199
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-BRAT-TRANS20160614

C. RASTIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 GAMBIER RD
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10396
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-THOMAS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	2720.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 66 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
HOUSE FREEDOM FUND

A. RASTIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 GAMBIER RD

City MOUNT VERNON	State OH	Zip Code 43050
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARIEL CORPORATION	Occupation (for Individual) EVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.10458

Amount of Each Receipt this Period
2700.00

Memo Item
EM-HUELSKAMP-TRANS20160630

B. RASTIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 GAMBIER RD

City MOUNT VERNON	State OH	Zip Code 43050
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARIEL CORPORATION	Occupation (for Individual) EVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : SA11AI.10411

Amount of Each Receipt this Period
2700.00

Memo Item
EM-CRANE-TRANS20160630

C. REMINGTON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2300 CEDARFIELD PKWY APT 263

City HENRICO	State VA	Zip Code 23233
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : SA11AI.10059

Amount of Each Receipt this Period
4250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9650.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 67 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RHOAD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1037 GLENN AVE
 City WASHINGTON COURT HOUSE State OH Zip Code 43160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10069
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-THOMAS-TRANS20160607

B. ROEHL, CAROL, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City VOCA State TX Zip Code 76887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.10060
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SANDERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7615 CLOVERBROOK PARK DR.
 City CENTERVILLE State OH Zip Code 45459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10174
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-GARRETT-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	315.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 68 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SANDERS, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7615 CLOVERBROOK PARK DR.

City CENTERVILLE	State OH	Zip Code 45459
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
65.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SA11AI.10203

Amount of Each Receipt this Period
35.00

Memo Item
EM-BANKS-TRANS20160614

B. SANDERS, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7615 CLOVERBROOK PARK DR.

City CENTERVILLE	State OH	Zip Code 45459
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
95.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SA11AI.10223

Amount of Each Receipt this Period
15.00

Memo Item
EM-THOMAS-TRANS20160614

C. SANDERS, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7615 CLOVERBROOK PARK DR.

City CENTERVILLE	State OH	Zip Code 45459
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SA11AI.10200

Amount of Each Receipt this Period
15.00

Memo Item
EM-BRAT-TRANS20160614

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 69 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SANDERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7615 CLOVERBROOK PARK DR.
 City CENTERVILLE State OH Zip Code 45459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10206
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-CRANE-TRANS20160614

B. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66
 City LAKE DELTON State WI Zip Code 53940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT CONSTRUCTION, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10382
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-BLUM-TRANS20160630

C. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66
 City LAKE DELTON State WI Zip Code 53940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT CONSTRUCTION, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10459
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-HUELSKAMP-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 70 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : SA11AI.10365

Amount of Each Receipt this Period
50.00

Memo Item
EM-BANKS-TRANS20160630

B. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : SA11AI.10537

Amount of Each Receipt this Period
100.00

Memo Item

C. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : SA11AI.10412

Amount of Each Receipt this Period
50.00

Memo Item
EM-CRANE-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 71 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10429

Amount of Each Receipt this Period
50.00

Memo Item
EM-GARRETT-TRANS20160630

B. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10471

Amount of Each Receipt this Period
50.00

Memo Item
EM-DAVIDSON-TRANS20160630

C. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.10440

Amount of Each Receipt this Period
50.00

Memo Item
EM-BUDD-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 72 OF 159
<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)
HOUSE FREEDOM FUND

A. SCOTT, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10397

Amount of Each Receipt this Period
50.00

Memo Item
EM-THOMAS-TRANS20160630

B. SHEPHERD, ALLEN, S., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6295 COSGRAY RD

City DUBLIN	State OH	Zip Code 43016
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) DEVELOPMENT/EXCEVATING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.10486

Amount of Each Receipt this Period
5000.00

Memo Item

C. STUMP, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4822 25TH ST N

City ARLINGTON	State VA	Zip Code 22207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2016
Transaction ID : SA11AI.10064

Amount of Each Receipt this Period
15.00

Memo Item
EM-THOMAS-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	5065.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 73 OF 159
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. TONG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MUSKY RIDGE DR
 City HACKETTSTOWN State NJ Zip Code 07840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11AI.10430
 Amount of Each Receipt this Period 150.00
 Memo Item
 EM-GARRETT-TRANS20160630

B. TRIEM, SWANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 737
 City EVANSTON State IL Zip Code 60204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 25 / 2016
Transaction ID : SA11AI.10345
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WEIDIG, LARRY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 S 18TH ST
 City SHEBOYGAN State WI Zip Code 53081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 08 / 2016
Transaction ID : SA11AI.10279
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	215.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 74 OF 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. WERTS, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4431 BERNARD ST
 City LAKE OSWEGO State OR Zip Code 97035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.10066
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-THOMAS-TRANS20160607

B. WRIGHT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 GAMBIER RD
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10413
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-CRANE-TRANS20160630

C. WRIGHT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 GAMBIER RD
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.10398
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-THOMAS-TRANS20160630

SUBTOTAL of Receipts This Page (optional).....▶	5450.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 75 OF 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WRIGHT, KAREN, , ,

Mailing Address **1240 GAMBIER RD**

City **MOUNT VERNON** State **OH** Zip Code **43050**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ARIEL CORPORATION** Occupation (for Individual) **PRESIDENT AND CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13100.00

Date of Receipt
06 / 30 / 2016

Transaction ID : SA11AI.10460

Amount of Each Receipt this Period
2700.00

Memo Item
EM-HUELSKAMP-TRANS20160630

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	67515.00

**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)	PAGE 76 OF 159
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE FREEDOM FUND

A. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

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

Mailing Address 1111 14TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 01 / 2016

Transaction ID : SA11C.9999

Amount of Each Receipt this Period
2500.00

Memo Item

B. COMMUNITY BANCSHARES OF MISSISSIPPI INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1255 W GOVERNMENT ST

City BRANDON State MS Zip Code 39043

FEC ID number of contributing federal political committee. **C** C00228924

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27900.00

Date of Receipt
06 / 01 / 2016

Transaction ID : SA11C.10085

Amount of Each Receipt this Period
5000.00

Memo Item
EM-CRANE-TRANS20160607

C. JIM BANKS FOR CONGRESS, INC.

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

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC ID number of contributing federal political committee. **C** C00577999

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1110.25

Date of Receipt
06 / 01 / 2016

Transaction ID : SA11C.10086

Amount of Each Receipt this Period
1000.00

Memo Item
EM-CRANE-TRANS20160607

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 77 OF 159
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE FREEDOM FUND

A. JIM JORDAN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 STATE ROUTE 560 SOUTH

City URBANA	State OH	Zip Code 43078
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2016

Transaction ID : SA11C.10087

Amount of Each Receipt this Period
2000.00

Memo Item
EM-CRANE-TRANS20160607

B. JIM JORDAN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 STATE ROUTE 560 SOUTH

City URBANA	State OH	Zip Code 43078
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2016

Transaction ID : SA11C.10088

Amount of Each Receipt this Period
2000.00

Memo Item
EM-BUDD-TRANS20160607

C. PATRIOTS FOR PERRY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 147

City RED LION	State PA	Zip Code 17356
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00510164

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2016

Transaction ID : SA11C.10000

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	17500.00

**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)	PAGE 78 OF 159
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE	State IA	Zip Code 52001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00543926

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
678.10

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		07		2016

Transaction ID : SA17.10282

Amount of Each Receipt this Period
678.10

Memo Item
PAC FUNDRAISING SERVICES

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	678.10
TOTAL This Period (last page this line number only).....▶	678.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ALLEGIANCE DIRECT LLC

Mailing Address 15 N. KING ST. STE. 205

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

Transaction ID : SB21B.10316
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number

Transaction ID : SB21B.9954
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. LINODE.COM

Mailing Address 329 E JIMMIE LEEDS RD

City GALLOWAY State NJ Zip Code 08205

Purpose of Disbursement
PAC ONLINE SERVICE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number

Transaction ID : SB21B.9955
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
PAC EMAIL MARKETING - NO ITEMIZATION

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10176
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
PAC EMAIL MARKETING - NO ITEMIZATION

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10288
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10314
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement
PAC SHIPPING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C
Transaction ID : SB21B.10315
Amount of Each Disbursement this Period
350.47

Memo Item

Full Name (Last, First, Middle Initial)

B. BOLD COLORS CONSULTING, LLC

Mailing Address 3125 TIGER RUN COURT
STE 111

City CARLSBAD State CA Zip Code 92010

Purpose of Disbursement
PAC FUNDRAISING SERVICES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 06 / 2016

FEC Identification Number
C
Transaction ID : SB21B.10283
Amount of Each Disbursement this Period
10380.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 02 / 2016

FEC Identification Number
C
Transaction ID : SB21B.10284
Amount of Each Disbursement this Period
227.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10607.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC BANK FEES Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 13 / 2016

FEC Identification Number C

Transaction ID : SB21B.10192

Amount of Each Disbursement this Period 232.77

Memo Item

Full Name (Last, First, Middle Initial)
B. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC BANK FEES Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 24 / 2016

FEC Identification Number C

Transaction ID : SB21B.10306

Amount of Each Disbursement this Period 62.46

Memo Item

Full Name (Last, First, Middle Initial)
C. ELECTEK USA

Mailing Address PO BOX 23715

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement PAC SOFTWARE Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 07 / 2016

FEC Identification Number C

Transaction ID : SB21B.10285

Amount of Each Disbursement this Period 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 795.23

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10300
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.9967
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.9968
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.9969

Amount of Each Disbursement this Period

[REDACTED] 19.06

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.9970

Amount of Each Disbursement this Period

[REDACTED] 30.44

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.9971

Amount of Each Disbursement this Period

[REDACTED] 14.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 63.78

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

FEC Identification Number

C

Transaction ID : SB21B.10190

Amount of Each Disbursement this Period

19.89

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.10191

Amount of Each Disbursement this Period

7.74

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number

C

Transaction ID : SB21B.10193

Amount of Each Disbursement this Period

291.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

319.55

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement PAC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10194

Amount of Each Disbursement this Period: 2.49

Memo Item

Full Name (Last, First, Middle Initial)
B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement PAC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10290

Amount of Each Disbursement this Period: 0.45

Memo Item

Full Name (Last, First, Middle Initial)
C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement PAC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 21 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10291

Amount of Each Disbursement this Period: 3.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6.14

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	6

FEC Identification Number

Transaction ID : SB21B.10308
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	6

FEC Identification Number

Transaction ID : SB21B.10309
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	6

FEC Identification Number

Transaction ID : SB21B.10330
 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10331
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address PO BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement
PAC BANK FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.10299
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ZEALOUS, LLC

Mailing Address 110 N MILAM #177

City FREDERICKSBURG State TX Zip Code 78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.9781
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: IA District: 01

Date of Disbursement
MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number
C C00543926
Transaction ID : SB23.9962
Amount of Each Disbursement this Period
105.00

Memo Item

Full Name (Last, First, Middle Initial)
B. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: IA District: 01

Date of Disbursement
MM / DD / YYYY
06 / 01 / 2016

FEC Identification Number
C C00543926
Transaction ID : SB23.10136
Amount of Each Disbursement this Period
10.00

Memo Item

Full Name (Last, First, Middle Initial)
C. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY JULIA KIRK ID# 5383

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: IA District: 01

Date of Disbursement
MM / DD / YYYY
06 / 01 / 2016

FEC Identification Number
C C00543926
Transaction ID : SB23.10137
Amount of Each Disbursement this Period
10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

105.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY JUDY PETTIT ID# 5160

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement: 06 / 01 / 2016

FEC Identification Number: C00543926
Transaction ID : SB23.10138
Amount of Each Disbursement this Period: 50.00

Memo Item

B. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY LAWRENCE FARGHER ID# 4354

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement: 06 / 03 / 2016

FEC Identification Number: C00543926
Transaction ID : SB23.10139
Amount of Each Disbursement this Period: 35.00

Memo Item

C. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
TRANSMITTAL OF EAMARKS

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement: 06 / 14 / 2016

FEC Identification Number: C00543926
Transaction ID : SB23.10179
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 50.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. BLUM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y Y 06 / 07 / 2016	
Mailing Address 2728 ASBURY ROAD SUITE 400			
City DUBUQUE	State IA	Zip Code 52001	
Purpose of Disbursement EARMARKED BY JOHN DESZYCK ID# 7435		Category/ Type 011	FEC Identification Number C C00543926 Transaction ID : SB23.10235 Amount of Each Disbursement this Period 50.00
Candidate Name BLUM, RODNEY, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District: 01	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BLUM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y Y 06 / 30 / 2016	
Mailing Address 2728 ASBURY ROAD SUITE 400			
City DUBUQUE	State IA	Zip Code 52001	
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Category/ Type 011	FEC Identification Number C C00543926 Transaction ID : SB23.10318 Amount of Each Disbursement this Period 300.00
Candidate Name BLUM, RODNEY, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District: 01	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BLUM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y Y 06 / 29 / 2016	
Mailing Address 2728 ASBURY ROAD SUITE 400			
City DUBUQUE	State IA	Zip Code 52001	
Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 5193		Category/ Type 011	FEC Identification Number C C00543926 Transaction ID : SB23.10619 Amount of Each Disbursement this Period 5.00
Candidate Name BLUM, RODNEY, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District: 01	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY JAMES BYRNES ID# 7449

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00543926

Transaction ID : SB23.10620
Amount of Each Disbursement this Period
35.00

Memo Item

Full Name (Last, First, Middle Initial)
B. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY MARK DEHLIN ID# 5319

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00543926

Transaction ID : SB23.10622
Amount of Each Disbursement this Period
15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY SHERRY FLEMING ID# 6964

011
Category/
Type

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00543926

Transaction ID : SB23.10623
Amount of Each Disbursement this Period
15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY WILLIAM LEHFELD ID# 6186

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10625

Amount of Each Disbursement this Period
10.00

Memo Item

B. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY JACK MAAS ID# 4339

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10626

Amount of Each Disbursement this Period
15.00

Memo Item

C. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY RUSSELL MARTIN ID# 6382

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10627

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10618

Amount of Each Disbursement this Period
10.00

Memo Item

B. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10621

Amount of Each Disbursement this Period
100.00

Memo Item

C. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY MARCIA HOOLEY ID# 5506

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number
C00543926
Transaction ID : SB23.10624

Amount of Each Disbursement this Period
35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C00543926 Transaction ID : SB23.10628
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement EARMARKED BY TOMMY MEEKER ID# 7451		Amount of Each Disbursement this Period 5.00
Candidate Name BLUM, RODNEY, , ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C00543926 Transaction ID : SB23.10629
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement EARMARKED BY JOHN SCOTT ID# 6163		Amount of Each Disbursement this Period 50.00
Candidate Name BLUM, RODNEY, , ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.9965
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 8595.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

8595.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C C00476457 Transaction ID : SB23.10121
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JULIA KIRK ID# 5383		Category/Type 011
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 10.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C C00476457 Transaction ID : SB23.10122
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JUDY PETTIT ID# 5160		Category/Type 011
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 50.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C C00476457 Transaction ID : SB23.10125
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY THOMAS COLBERT ID# 7434		Category/Type 011
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 400.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10126
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY COMMUNITY BANCSHARES OF MISSISSIPPI INC. POLITICAL ACTION COMMITTEE ID# 7224		011 Category/ Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10127
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JIM BANKS FOR CONGRESS, INC. ID# 6542		011 Category/ Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10128
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JIM JORDAN FOR CONGRESS ID# 4148		011 Category/ Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10123
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY LAWRENCE FARGHER ID# 4354		Amount of Each Disbursement this Period 35.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10124
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY ROGER KEATS ID# 5248		Amount of Each Disbursement this Period 100.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 14 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10183
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 75.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10263
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JOHN DESZYCK ID# 7435		Amount of Each Disbursement this Period 50.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA District: 13		

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10262
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 5193		Amount of Each Disbursement this Period 10.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA District: 13		

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10264
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY BRIAN SANDERS ID# 4621		Amount of Each Disbursement this Period 15.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA District: 13		

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CRANE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
CRANE, MICHAEL, ROBERT, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: GA District: 13 PRIMARY RUNOFF

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00476457

Transaction ID : SB23.10322

Amount of Each Disbursement this Period

50.00

Memo Item

B. CRANE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement
EARMARKED BY MICHAEL HENDRICKS ID# 7400

011
Category/
Type

Candidate Name
CRANE, MICHAEL, ROBERT, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: GA District: 13 PRIMARY RUNOFF

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2016

FEC Identification Number

C C00476457

Transaction ID : SB23.10353

Amount of Each Disbursement this Period

50.00

Memo Item

C. CRANE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
CRANE, MICHAEL, ROBERT, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: GA District: 13 PRIMARY RUNOFF

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00476457

Transaction ID : SB23.10320

Amount of Each Disbursement this Period

5690.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5740.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10648
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 5193		Amount of Each Disbursement this Period 0.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10649
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY JAMES BYRNES ID# 7449		Amount of Each Disbursement this Period 35.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10651
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY MARK DEHLIN ID# 5319		Amount of Each Disbursement this Period 15.00
Candidate Name CRANE, MICHAEL, ROBERT, ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: GA	District: 13	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address P.O. BOX 1370			
City FAIRBURN	State GA	Zip Code 30213	
Purpose of Disbursement EARMARKED BY JIM HALL ID# 4579		Category/ Type 011	FEC Identification Number C00476457 Transaction ID : SB23.10652 Amount of Each Disbursement this Period 15.00
Candidate Name CRANE, MICHAEL, ROBERT, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF		
State: GA District: 13	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address P.O. BOX 1370			
City FAIRBURN	State GA	Zip Code 30213	
Purpose of Disbursement EARMARKED BY WILLIAM LEHFELD ID# 6186		Category/ Type 011	FEC Identification Number C00476457 Transaction ID : SB23.10653 Amount of Each Disbursement this Period 10.00
Candidate Name CRANE, MICHAEL, ROBERT, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF		
State: GA District: 13	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address P.O. BOX 1370			
City FAIRBURN	State GA	Zip Code 30213	
Purpose of Disbursement EARMARKED BY JACK MAAS ID# 4339		Category/ Type 011	FEC Identification Number C00476457 Transaction ID : SB23.10654 Amount of Each Disbursement this Period 15.00
Candidate Name CRANE, MICHAEL, ROBERT, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF		
State: GA District: 13	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10655
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY RUSSELL MARTIN ID# 6382		011 Category/Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 5.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) B. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10657
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY HAYNES PARKER ID# 7452		011 Category/Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 35.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

Full Name (Last, First, Middle Initial) C. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address P.O. BOX 1370		FEC Identification Number C00476457 Transaction ID : SB23.10650
City FAIRBURN	State GA	Zip Code 30213
Purpose of Disbursement EARMARKED BY STEVEN COWLES ID# 7450		011 Category/Type
Candidate Name CRANE, MICHAEL, ROBERT, ,		Amount of Each Disbursement this Period 100.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	<input checked="" type="checkbox"/> Memo Item
State: GA	District: 13	

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. CRANE FOR CONGRESS INC

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement: EARMARKED BY TOMMY MEEKER ID# 7451

Candidate Name: **CRANE, MICHAEL, ROBERT, ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) **PRIMARY RUNOFF**

State: GA District: 13

FEC Identification Number: **C00476457**
Transaction ID : **SB23.10656**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CRANE FOR CONGRESS INC

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement: EARMARKED BY THOMAS RASTIN ID# 7409

Candidate Name: **CRANE, MICHAEL, ROBERT, ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) **PRIMARY RUNOFF**

State: GA District: 13

FEC Identification Number: **C00476457**
Transaction ID : **SB23.10658**
Amount of Each Disbursement this Period: 2700.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CRANE FOR CONGRESS INC

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Mailing Address P.O. BOX 1370

City FAIRBURN State GA Zip Code 30213

Purpose of Disbursement: EARMARKED BY JOHN SCOTT ID# 6163

Candidate Name: **CRANE, MICHAEL, ROBERT, ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) **PRIMARY RUNOFF**

State: GA District: 13

FEC Identification Number: **C00476457**
Transaction ID : **SB23.10659**
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CRANE FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016	
Mailing Address P.O. BOX 1370		FEC Identification Number C C00476457 Transaction ID : SB23.10660 Amount of Each Disbursement this Period 2700.00	
City FAIRBURN	State GA	Zip Code 30213	Category/ Type 011
Purpose of Disbursement EARMARKED BY KAREN WRIGHT ID# 7410			
Candidate Name CRANE, MICHAEL, ROBERT, ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 13	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.9964 Amount of Each Disbursement this Period 2795.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement TRANSMITTAL OF EARMARKS			
Candidate Name DAVIDSON, WARREN, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10164 Amount of Each Disbursement this Period 10.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement EARMARKED BY JULIA KIRK ID# 5383			
Candidate Name DAVIDSON, WARREN, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶	2795.00
TOTAL This Period (last page this line number only)..... ▶	2795.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10165 Amount of Each Disbursement this Period 50.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement EARMARKED BY JUDY PETTIT ID# 5160			
Candidate Name DAVIDSON, WARREN, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10167 Amount of Each Disbursement this Period 2700.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement EARMARKED BY NATHAN BACHMAN ID# 4286			
Candidate Name DAVIDSON, WARREN, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10166 Amount of Each Disbursement this Period 35.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement EARMARKED BY LAWRENCE FARGHER ID# 4354			
Candidate Name DAVIDSON, WARREN, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 14 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10184 Amount of Each Disbursement this Period 50.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Candidate Name DAVIDSON, WARREN, , ,			Amount of Each Disbursement this Period 50.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10236 Amount of Each Disbursement this Period 50.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement EARMARKED BY JOHN DESZYCK ID# 7435		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
Candidate Name DAVIDSON, WARREN, , ,			Amount of Each Disbursement this Period 50.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016	
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10323 Amount of Each Disbursement this Period 265.00	
City FAIRFIELD	State OH	Zip Code 45014	Category/ Type 011
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name DAVIDSON, WARREN, , ,			Amount of Each Disbursement this Period 265.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 08	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶	315.00
TOTAL This Period (last page this line number only)..... ▶	315.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10709
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 5193		011 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		Amount of Each Disbursement this Period 0.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10710
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY JAMES BYRNES ID# 7449		011 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		Amount of Each Disbursement this Period 35.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10712
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY MARK DEHLIN ID# 5319		011 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		Amount of Each Disbursement this Period 15.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: OH	District: 08	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address 3235 HOMEWARD WAY			
City FAIRFIELD	State OH	Zip Code 45014	
Purpose of Disbursement EARMARKED BY SHERRY FLEMING ID# 6964		Category/ Type 011	FEC Identification Number C C00600718 Transaction ID : SB23.10713 Amount of Each Disbursement this Period 15.00
Candidate Name DAVIDSON, WARREN, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 08	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address 3235 HOMEWARD WAY			
City FAIRFIELD	State OH	Zip Code 45014	
Purpose of Disbursement EARMARKED BY WILLIAM LEHFELD ID# 6186		Category/ Type 011	FEC Identification Number C C00600718 Transaction ID : SB23.10715 Amount of Each Disbursement this Period 10.00
Candidate Name DAVIDSON, WARREN, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 08	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address 3235 HOMEWARD WAY			
City FAIRFIELD	State OH	Zip Code 45014	
Purpose of Disbursement EARMARKED BY JACK MAAS ID# 4339		Category/ Type 011	FEC Identification Number C C00600718 Transaction ID : SB23.10716 Amount of Each Disbursement this Period 15.00
Candidate Name DAVIDSON, WARREN, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 08	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10717
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY RUSSELL MARTIN ID# 6382		Amount of Each Disbursement this Period 0.00
Candidate Name DAVIDSON, WARREN, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 08	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10711
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY STEVEN COWLES ID# 7450		Amount of Each Disbursement this Period 100.00
Candidate Name DAVIDSON, WARREN, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 08	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.10714
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY ROBERT JORDAN ID# 7453		Amount of Each Disbursement this Period 10.00
Candidate Name DAVIDSON, WARREN, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 08	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C00600718 Transaction ID : SB23.10718
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY TOMMY MEEKER ID# 7451		Amount of Each Disbursement this Period 5.00
Candidate Name DAVIDSON, WARREN, , ,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 08	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C00600718 Transaction ID : SB23.10719
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY JOHN SCOTT ID# 6163		Amount of Each Disbursement this Period 50.00
Candidate Name DAVIDSON, WARREN, , ,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 08	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRIENDS OF DAVE BRAT INC.		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address PO BOX 5094		FEC Identification Number C00554949 Transaction ID : SB23.9959
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 80.00
Candidate Name BRAT, DAVID, ALAN, ,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 07	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

80.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

011

Candidate Name
BRAT, DAVID, ALAN, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10097

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY JULIA KIRK ID# 5383

011

Candidate Name
BRAT, DAVID, ALAN, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10098

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY RONALD LARSON ID# 6172

011

Candidate Name
BRAT, DAVID, ALAN, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10096

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY LAWRENCE FARGHER ID# 4354

011

Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10099

Amount of Each Disbursement this Period

35.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011

Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10180

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY BEVERLY GARRISON ID# 4368

011

Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 05 / 2016

FEC Identification Number

C C00554949

Transaction ID : SB23.10238

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement EARMARKED BY JOHN DESZYCK ID# 7435

Candidate Name BRAT, DAVID, ALAN, ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement: 06 / 07 / 2016

FEC Identification Number: C00554949
Transaction ID : SB23.10237

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement EARMARKED BY BRIAN SANDERS ID# 4621

Candidate Name BRAT, DAVID, ALAN, ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement: 06 / 08 / 2016

FEC Identification Number: C00554949
Transaction ID : SB23.10240

Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement EARMARKED BY BRIAN PRYOR ID# 4543

Candidate Name BRAT, DAVID, ALAN, ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement: 06 / 08 / 2016

FEC Identification Number: C00554949
Transaction ID : SB23.10239

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2016

Mailing Address P.O. BOX 11431

FEC Identification Number

C C00577999

City FORT WAYNE State IN Zip Code 46858

Transaction ID : SB23.9960

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Amount of Each Disbursement this Period

95.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 03

Memo Item

Full Name (Last, First, Middle Initial)
B. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2016

Mailing Address P.O. BOX 11431

FEC Identification Number

C C00577999

City FORT WAYNE State IN Zip Code 46858

Transaction ID : SB23.10103

Purpose of Disbursement
EARMARKED BY JULIA KIRK ID# 5383

011
Category/
Type

Amount of Each Disbursement this Period

10.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 03

Memo Item

Full Name (Last, First, Middle Initial)
C. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2016

Mailing Address P.O. BOX 11431

FEC Identification Number

C C00577999

City FORT WAYNE State IN Zip Code 46858

Transaction ID : SB23.10104

Purpose of Disbursement
EARMARKED BY JUDY PETTIT ID# 5160

011
Category/
Type

Amount of Each Disbursement this Period

50.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

95.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY LAWRENCE FARGHER ID# 4354

011

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

FEC Identification Number

C C00577999

Transaction ID : SB23.10105

Amount of Each Disbursement this Period

35.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2016

FEC Identification Number

C C00577999

Transaction ID : SB23.10178

Amount of Each Disbursement this Period

110.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY BEVERLY GARRISON ID# 4368

011

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 05 / 2016

FEC Identification Number

C C00577999

Transaction ID : SB23.10245

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

110.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY JOHN DESZYCK ID# 7435

011
Category/
Type

Transaction ID : SB23.10244

Amount of Each Disbursement this Period

50.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

Memo Item

State: IN District: 03

Full Name (Last, First, Middle Initial)
B. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY BRIAN SANDERS ID# 4621

011
Category/
Type

Transaction ID : SB23.10246

Amount of Each Disbursement this Period

35.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

Memo Item

State: IN District: 03

Full Name (Last, First, Middle Initial)
C. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Transaction ID : SB23.10317

Amount of Each Disbursement this Period

255.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

Memo Item

State: IN District: 03

SUBTOTAL of Disbursements This Page (optional)..... ▶

255.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011
Category/
Type

Transaction ID : SB23.10603

Amount of Each Disbursement this Period

0.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

State: IN District: 03

Full Name (Last, First, Middle Initial)
B. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY JAMES BYRNES ID# 7449

011
Category/
Type

Transaction ID : SB23.10604

Amount of Each Disbursement this Period

35.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

State: IN District: 03

Full Name (Last, First, Middle Initial)
C. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY MARK DEHLIN ID# 5319

011
Category/
Type

Transaction ID : SB23.10606

Amount of Each Disbursement this Period

15.00

Candidate Name

BANKS, JAMES, E, ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

State: IN District: 03

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY SHERRY FLEMING ID# 6964

011
Category/
Type

Transaction ID : SB23.10607

Amount of Each Disbursement this Period

15.00

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IN District: 03

Memo Item

Full Name (Last, First, Middle Initial)
B. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY WILLIAM LEHFELD ID# 6186

011
Category/
Type

Transaction ID : SB23.10608

Amount of Each Disbursement this Period

10.00

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IN District: 03

Memo Item

Full Name (Last, First, Middle Initial)
C. JIM BANKS FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2016

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

FEC Identification Number

C C00577999

Purpose of Disbursement
EARMARKED BY JACK MAAS ID# 4339

011
Category/
Type

Transaction ID : SB23.10609

Amount of Each Disbursement this Period

15.00

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IN District: 03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY RUSSELL MARTIN ID# 6382

011

Category/
Type

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	6		

FEC Identification Number

C00577999

Transaction ID : SB23.10610

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

011

Category/
Type

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	6		

FEC Identification Number

C00577999

Transaction ID : SB23.10605

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY TOMMY MEEKER ID# 7451

011

Category/
Type

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	6		

FEC Identification Number

C00577999

Transaction ID : SB23.10611

Amount of Each Disbursement this Period

5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
EARMARKED BY JOHN SCOTT ID# 6163

011

Category/
Type

Candidate Name
BANKS, JAMES, E, ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

FEC Identification Number

C C00577999

Transaction ID : SB23.10612

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KANSANS FOR HUELSKAMP

Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011

Category/
Type

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: KS District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

FEC Identification Number

C C00413096

Transaction ID : SB23.9958

Amount of Each Disbursement this Period

55.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KANSANS FOR HUELSKAMP

Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

011

Category/
Type

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KS District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

FEC Identification Number

C C00413096

Transaction ID : SB23.10161

Amount of Each Disbursement this Period

10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

55.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP			Date of Disbursement MM / DD / YYYY 06 / 01 / 2016		
Mailing Address PO BOX 410					
City FOWLER	State KS	Zip Code 67844	FEC Identification Number C C00413096 Transaction ID : SB23.10162		
Purpose of Disbursement EARMARKED BY JULIA KIRK ID# 5383		Category/ Type 011	Amount of Each Disbursement this Period 10.00		
Candidate Name HUELSKAMP, TIMOTHY, A., ,					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item		
State: KS District: 01					

Full Name (Last, First, Middle Initial) B. KANSANS FOR HUELSKAMP			Date of Disbursement MM / DD / YYYY 06 / 03 / 2016		
Mailing Address PO BOX 410					
City FOWLER	State KS	Zip Code 67844	FEC Identification Number C C00413096 Transaction ID : SB23.10163		
Purpose of Disbursement EARMARKED BY LAWRENCE FARGHER ID# 4354		Category/ Type 011	Amount of Each Disbursement this Period 35.00		
Candidate Name HUELSKAMP, TIMOTHY, A., ,					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item		
State: KS District: 01					

Full Name (Last, First, Middle Initial) C. KANSANS FOR HUELSKAMP			Date of Disbursement MM / DD / YYYY 06 / 14 / 2016		
Mailing Address PO BOX 410					
City FOWLER	State KS	Zip Code 67844	FEC Identification Number C C00413096 Transaction ID : SB23.10187		
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Category/ Type 011	Amount of Each Disbursement this Period 75.00		
Candidate Name HUELSKAMP, TIMOTHY, A., ,					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: KS District: 01					

SUBTOTAL of Disbursements This Page (optional)..... ▶	75.00
TOTAL This Period (last page this line number only)..... ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 05 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10272
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement EARMARKED BY BEVERLY GARRISON ID# 4368		Amount of Each Disbursement this Period 25.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS	District: 01	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10271
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement EARMARKED BY JOHN DESZYCK ID# 7435		Amount of Each Disbursement this Period 50.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS	District: 01	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10325
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 5715.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS	District: 01	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5715.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 27 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10699
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement EARMARKED BY MARILYN HINTON ID# 4459		Category/ Type 011
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Amount of Each Disbursement this Period 15.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: KS	District: 01	

Full Name (Last, First, Middle Initial) B. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10694
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 5193		Category/ Type 011
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Amount of Each Disbursement this Period 5.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: KS	District: 01	

Full Name (Last, First, Middle Initial) C. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address PO BOX 410		FEC Identification Number C C00413096 Transaction ID : SB23.10695
City FOWLER	State KS	Zip Code 67844
Purpose of Disbursement EARMARKED BY JAMES BYRNES ID# 7449		Category/ Type 011
Candidate Name HUELSKAMP, TIMOTHY, A., ,		Amount of Each Disbursement this Period 35.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: KS	District: 01	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY MARK DEHLIN ID# 5319		Category/ Type 011	FEC Identification Number C C00413096 Transaction ID : SB23.10697 Amount of Each Disbursement this Period 15.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY SHERRY FLEMING ID# 6964		Category/ Type 011	FEC Identification Number C C00413096 Transaction ID : SB23.10698 Amount of Each Disbursement this Period 15.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY WILLIAM LEHFELD ID# 6186		Category/ Type 011	FEC Identification Number C C00413096 Transaction ID : SB23.10702 Amount of Each Disbursement this Period 10.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY JACK MAAS ID# 4339

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: 06 / 29 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10703

Amount of Each Disbursement this Period: 15.00

Memo Item

B. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY RUSSELL MARTIN ID# 6382

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: 06 / 29 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10704

Amount of Each Disbursement this Period: 5.00

Memo Item

C. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: 06 / 30 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10696

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY BRIAN JACKSON ID# 6347

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10700

Amount of Each Disbursement this Period: 35.00

Memo Item

B. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY ROBERT JORDAN ID# 7453

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10701

Amount of Each Disbursement this Period: 10.00

Memo Item

C. KANSANS FOR HUELSKAMP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement
EARMARKED BY TOMMY MEEKER ID# 7451

Candidate Name
HUELSKAMP, TIMOTHY, A., ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 01

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number: C00413096
Transaction ID : SB23.10705

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY THOMAS RASTIN ID# 7409		Category/ Type 011	FEC Identification Number C00413096 Transaction ID : SB23.10706 Amount of Each Disbursement this Period 2700.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY JOHN SCOTT ID# 6163		Category/ Type 011	FEC Identification Number C00413096 Transaction ID : SB23.10707 Amount of Each Disbursement this Period 50.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016	
Mailing Address PO BOX 410			
City FOWLER	State KS	Zip Code 67844	
Purpose of Disbursement EARMARKED BY KAREN WRIGHT ID# 7410		Category/ Type 011	FEC Identification Number C00413096 Transaction ID : SB23.10708 Amount of Each Disbursement this Period 2700.00
Candidate Name HUELSKAMP, TIMOTHY, A., ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 01	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. MARY THOMAS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address 3689 COOLIDGE COURT SUITE 6		FEC Identification Number C00581397 Transaction ID : SB23.9961
City TALLAHASSEE	State FL	Zip Code 32311
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Category/Type 011
Candidate Name THOMAS, MARY, , ,		Amount of Each Disbursement this Period 450.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 02	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. MARY THOMAS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 3689 COOLIDGE COURT SUITE 6		FEC Identification Number C00581397 Transaction ID : SB23.10106
City TALLAHASSEE	State FL	Zip Code 32311
Purpose of Disbursement EARMARKED BY JOHN FRIEDEL ID# 4430		Category/Type 011
Candidate Name THOMAS, MARY, , ,		Amount of Each Disbursement this Period 50.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 02	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MARY THOMAS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 3689 COOLIDGE COURT SUITE 6		FEC Identification Number C00581397 Transaction ID : SB23.10107
City TALLAHASSEE	State FL	Zip Code 32311
Purpose of Disbursement EARMARKED BY LARRY STUMP ID# 5399		Category/Type 011
Candidate Name THOMAS, MARY, , ,		Amount of Each Disbursement this Period 15.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 02	
		<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

450.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY R.W. CURTIS ID# 6180

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

FEC Identification Number

C00581397

Transaction ID : SB23.10108

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY CLAY WERTS ID# 7419

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

FEC Identification Number

C00581397

Transaction ID : SB23.10109

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

FEC Identification Number

C00581397

Transaction ID : SB23.10110

Amount of Each Disbursement this Period

10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY LAWRENCE FARGHER ID# 4354

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10111
Amount of Each Disbursement this Period: 100.00

Category/Type: 011

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY JOHN RHOAD ID# 5344

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10112
Amount of Each Disbursement this Period: 50.00

Category/Type: 011

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY ROGER KEATS ID# 5248

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10113
Amount of Each Disbursement this Period: 100.00

Category/Type: 011

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY R.F. CHANDLER ID# 7420

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼
State: FL District: 02

Date of Disbursement
MM / DD / YYYY
06 / 04 / 2016

FEC Identification Number
C00581397
Transaction ID : SB23.10114
Amount of Each Disbursement this Period
25.00

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼
State: FL District: 02

Date of Disbursement
MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number
C00581397
Transaction ID : SB23.9957
Amount of Each Disbursement this Period
5000.00

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼
State: FL District: 02

Date of Disbursement
MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number
C00581397
Transaction ID : SB23.10188
Amount of Each Disbursement this Period
5285.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10285.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 05 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY DANIELA FILIP ID# 6972

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10252
Amount of Each Disbursement this Period: 35.00

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 05 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY BEVERLY GARRISON ID# 4368

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10254
Amount of Each Disbursement this Period: 30.00

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 07 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY JOHN DESZYCK ID# 7435

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10251
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY MARILYN HINTON ID# 4459

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10255

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10247

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY MITCH COUNTS ID# 6213

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10250

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 08 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY THOMAS FRANSEEN ID# 5175

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10253
Amount of Each Disbursement this Period: 20.00

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 08 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY BRIAN SANDERS ID# 4621

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10256
Amount of Each Disbursement this Period: 15.00

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 10 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY JOHN CHILDS ID# 6539

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10248
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 10 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6
City: TALLAHASSEE, State: FL, Zip Code: 32311

Purpose of Disbursement: EARMARKED BY MARLENE CHILDS ID# 6540
Candidate Name: THOMAS, MARY, , ,
Office Sought: House, Senate, President
Disbursement For: 2016, Primary, General, Other (specify) ▼
State: FL, District: 02

FEC Identification Number: C00581397
Transaction ID: SB23.10249
Amount of Each Disbursement this Period: 2500.00
 Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 29 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6
City: TALLAHASSEE, State: FL, Zip Code: 32311

Purpose of Disbursement: TRANSMITTAL OF EARMARKS
Candidate Name: THOMAS, MARY, , ,
Office Sought: House, Senate, President
Disbursement For: 2016, Primary, General, Other (specify) ▼
State: FL, District: 02

FEC Identification Number: C00581397
Transaction ID: SB23.10326
Amount of Each Disbursement this Period: 50.00
 Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: 06 / 24 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6
City: TALLAHASSEE, State: FL, Zip Code: 32311

Purpose of Disbursement: EARMARKED BY MICHAEL HENDRICKS ID# 7400
Candidate Name: THOMAS, MARY, , ,
Office Sought: House, Senate, President
Disbursement For: 2016, Primary, General, Other (specify) ▼
State: FL, District: 02

FEC Identification Number: C00581397
Transaction ID: SB23.10352
Amount of Each Disbursement this Period: 50.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10327

Amount of Each Disbursement this Period

5670.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10633

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY JAMES BYRNES ID# 7449

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10634

Amount of Each Disbursement this Period

35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5670.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY MARK DEHLIN ID# 5319

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10636

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY SHERRY FLEMING ID# 6964

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: FL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10637

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY JIM HALL ID# 4579

011

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10638

Amount of Each Disbursement this Period

15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY WILLIAM LEHFELD ID# 6186

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10639
Amount of Each Disbursement this Period: 10.00

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY JACK MAAS ID# 4339

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10640
Amount of Each Disbursement this Period: 15.00

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY RUSSELL MARTIN ID# 6382

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10641
Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10635

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY TOMMY MEEKER ID# 7451

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10642

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY THOMAS FOR CONGRESS

Mailing Address 3689 COOLIDGE COURT
SUITE 6

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement
EARMARKED BY THOMAS RASTIN ID# 7409

011
Category/
Type

Candidate Name
THOMAS, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00581397

Transaction ID : SB23.10643

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY JOHN SCOTT ID# 6163

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10644
Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MARY THOMAS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Mailing Address: 3689 COOLIDGE COURT SUITE 6

City: TALLAHASSEE State: FL Zip Code: 32311

Purpose of Disbursement: EARMARKED BY KAREN WRIGHT ID# 7410

Candidate Name: THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

FEC Identification Number: C00581397
Transaction ID : SB23.10645
Amount of Each Disbursement this Period: 2700.00

Memo Item

Full Name (Last, First, Middle Initial)
C. SCOTT GARRETT FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2016

Mailing Address: P.O. BOX 905

City: NEWTON State: NJ Zip Code: 07860

Purpose of Disbursement: TRANSMITTAL OF EARMARKS

Candidate Name: GARRETT, SCOTT, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

FEC Identification Number: C00386110
Transaction ID : SB23.9963
Amount of Each Disbursement this Period: 55.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

FEC Identification Number

C00386110

Transaction ID : SB23.10143

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY JULIA KIRK ID# 5383

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

FEC Identification Number

C00386110

Transaction ID : SB23.10144

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY LAWRENCE FARGHER ID# 4354

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

FEC Identification Number

C00386110

Transaction ID : SB23.10145

Amount of Each Disbursement this Period

35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number
C C00386110
Transaction ID : SB23.10186
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY JOHN DESZYCK ID# 7435

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number
C C00386110
Transaction ID : SB23.10234
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number
C C00386110
Transaction ID : SB23.10185
Amount of Each Disbursement this Period
25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY BRIAN PRYOR ID# 4543

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 08 / 2016

FEC Identification Number
C C00386110
Transaction ID : **SB23.10231**
Amount of Each Disbursement this Period
10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY BRIAN SANDERS ID# 4621

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 08 / 2016

FEC Identification Number
C C00386110
Transaction ID : **SB23.10232**
Amount of Each Disbursement this Period
15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number
C C00386110
Transaction ID : **SB23.10324**
Amount of Each Disbursement this Period
360.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

360.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY MARILYN HINTON ID# 4459

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	7		2	0	1	6		

FEC Identification Number

C C00386110

Transaction ID : SB23.10669

Amount of Each Disbursement this Period

3	5	0	0								
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Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: NJ District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	6		

FEC Identification Number

C C00386110

Transaction ID : SB23.10664

Amount of Each Disbursement this Period

5	0	0									
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Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY JAMES BYRNES ID# 7449

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	6		

FEC Identification Number

C C00386110

Transaction ID : SB23.10665

Amount of Each Disbursement this Period

3	5	0	0								
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Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0	0	0									
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY MARK DEHLIN ID# 5319

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10667

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY SHERRY FLEMING ID# 6964

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10668

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY WILLIAM LEHFELD ID# 6186

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10672

Amount of Each Disbursement this Period

10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY JACK MAAS ID# 4339

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10673

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY RUSSELL MARTIN ID# 6382

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10674

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY DOUGLAS TONG ID# 6860

011
Category/
Type

Candidate Name
GARRETT, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10677

Amount of Each Disbursement this Period

15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10663

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10666

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY MARCIA HOOLEY ID# 5506

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10670

Amount of Each Disbursement this Period

35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY ROBERT JORDAN ID# 7453

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10671

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY TOMMY MEEKER ID# 7451

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10675

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement
EARMARKED BY JOHN SCOTT ID# 6163

011

Candidate Name
GARRETT, SCOTT, , ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C C00386110

Transaction ID : SB23.10676

Amount of Each Disbursement this Period

50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. TED BUDD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

FEC Identification Number

C C00614776

Transaction ID : **SB23.9966**

Amount of Each Disbursement this Period

2220.00

Memo Item

B. TED BUDD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY PAULINE ZAZULAK ID# 4492

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

FEC Identification Number

C C00614776

Transaction ID : **SB23.10147**

Amount of Each Disbursement this Period

15.00

Memo Item

C. TED BUDD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY JIM JORDAN FOR CONGRESS ID# 4148

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

FEC Identification Number

C C00614776

Transaction ID : **SB23.10146**

Amount of Each Disbursement this Period

2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2220.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C00614776 Transaction ID : SB23.10148
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY CHRISTINA BERKSTRESSER ID# 6165		Category/Type 011
Candidate Name BUDD, THEODORE, P., ,		Amount of Each Disbursement this Period 10.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ JUNE SPECIAL PRIMARY	<input checked="" type="checkbox"/> Memo Item
State: NC	District: 13	

Full Name (Last, First, Middle Initial) B. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C00614776 Transaction ID : SB23.10149
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY JULIA KIRK ID# 5383		Category/Type 011
Candidate Name BUDD, THEODORE, P., ,		Amount of Each Disbursement this Period 10.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ JUNE SPECIAL PRIMARY	<input checked="" type="checkbox"/> Memo Item
State: NC	District: 13	

Full Name (Last, First, Middle Initial) C. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C00614776 Transaction ID : SB23.10150
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY BRIAN JACKSON ID# 6347		Category/Type 011
Candidate Name BUDD, THEODORE, P., ,		Amount of Each Disbursement this Period 35.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ JUNE SPECIAL PRIMARY	<input checked="" type="checkbox"/> Memo Item
State: NC	District: 13	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	6

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

FEC Identification Number

C C00614776

Purpose of Disbursement
EARMARKED BY JUDY PETTIT ID# 5160

011
Category/
Type

Transaction ID : SB23.10151

Amount of Each Disbursement this Period

50.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) **JUNE SPECIAL PRIMARY**

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	6

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

FEC Identification Number

C C00614776

Purpose of Disbursement
EARMARKED BY MARILYN HINTON ID# 4459

011
Category/
Type

Transaction ID : SB23.10152

Amount of Each Disbursement this Period

50.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) **JUNE SPECIAL PRIMARY**

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	6

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

FEC Identification Number

C C00614776

Purpose of Disbursement
EARMARKED BY LAWRENCE FARGHER ID# 4354

011
Category/
Type

Transaction ID : SB23.10153

Amount of Each Disbursement this Period

50.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) **JUNE SPECIAL PRIMARY**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10182

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Amount of Each Disbursement this Period

5025.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10270

Purpose of Disbursement
EARMARKED BY MITCH COUNTS ID# 6213

011
Category/
Type

Amount of Each Disbursement this Period

25.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10268

Purpose of Disbursement
EARMARKED BY JOHN CHILDS ID# 6539

011
Category/
Type

Amount of Each Disbursement this Period

2500.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5025.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY MARLENE CHILDS ID# 6540

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 10 / 2016

FEC Identification Number
C00614776
Transaction ID : SB23.10269
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number
C00614776
Transaction ID : SB23.10181
Amount of Each Disbursement this Period
75.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY BEVERLY GARRISON ID# 4368

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 05 / 2016

FEC Identification Number
C00614776
Transaction ID : SB23.10265
Amount of Each Disbursement this Period
25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY JOHN DESZYCK ID# 7435

011

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
JUNE SPECIAL PRIMARY

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

FEC Identification Number

C C00614776

Transaction ID : SB23.10266

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

FEC Identification Number

C C00614776

Transaction ID : SB23.10321

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY MICHAEL HENDRICKS ID# 7400

011

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 24 / 2016

FEC Identification Number

C C00614776

Transaction ID : SB23.10354

Amount of Each Disbursement this Period

50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number
C C00614776
Transaction ID : SB23.10319
Amount of Each Disbursement this Period
255.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY PRAMOD BHOOMA ID# 5193

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C C00614776
Transaction ID : SB23.10679
Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE State NC Zip Code 27006

Purpose of Disbursement
EARMARKED BY JAMES BYRNES ID# 7449

011
Category/
Type

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: NC District: 13

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number
C C00614776
Transaction ID : SB23.10680
Amount of Each Disbursement this Period
35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

255.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10682

Purpose of Disbursement
EARMARKED BY MARK DEHLIN ID# 5319

011
Category/
Type

Amount of Each Disbursement this Period

15.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
B. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10683

Purpose of Disbursement
EARMARKED BY SHERRY FLEMING ID# 6964

011
Category/
Type

Amount of Each Disbursement this Period

15.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
C. TED BUDD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2016

Mailing Address 321 MAPLEWOOD LANE

FEC Identification Number

C C00614776

City ADVANCE State NC Zip Code 27006

Transaction ID : SB23.10684

Purpose of Disbursement
EARMARKED BY WILLIAM LEHFELD ID# 6186

011
Category/
Type

Amount of Each Disbursement this Period

10.00

Candidate Name
BUDD, THEODORE, P., ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C 00614776 Transaction ID : SB23.10685
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY JACK MAAS ID# 4339		Amount of Each Disbursement this Period 15.00
Candidate Name BUDD, THEODORE, P., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C 00614776 Transaction ID : SB23.10686
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY RUSSELL MARTIN ID# 6382		Amount of Each Disbursement this Period 5.00
Candidate Name BUDD, THEODORE, P., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C 00614776 Transaction ID : SB23.10681
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY STEVEN COWLES ID# 7450		Amount of Each Disbursement this Period 100.00
Candidate Name BUDD, THEODORE, P., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C 00614776 Transaction ID : SB23.10687
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY TOMMY MEEKER ID# 7451		Amount of Each Disbursement this Period 5.00
Candidate Name BUDD, THEODORE, P., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. TED BUDD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 321 MAPLEWOOD LANE		FEC Identification Number C 00614776 Transaction ID : SB23.10688
City ADVANCE	State NC	Zip Code 27006
Purpose of Disbursement EARMARKED BY JOHN SCOTT ID# 6163		Amount of Each Disbursement this Period 50.00
Candidate Name BUDD, THEODORE, P., ,		Category/ Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 13	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00
49030.00