

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

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

FOR LINE NUMBER: PAGE 1666 OF 4510

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. KRONBERG, KARL, , ,**

Mailing Address 838 ARNOLD RD

City  
LOWELL

State  
OH

Zip Code  
45744-7195

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 ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2019

Transaction ID : AB08A1ADFBBB941B2B1I

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/PERRY/TRANS20191017

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

**B. FRANZ, MARY-BRENDA, , ,**

Mailing Address 11 CHANCE LN

City  
KEARNEYSVILLE

State  
WV

Zip Code  
25430-2762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VETERANS ADMINISTRATION

Occupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2019

Transaction ID : AB0B11DAAEC3C4DAD93C

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/HICE/TRANS20191023

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

**C. ALEXANDER, LINDA, , ,**

Mailing Address 3475 OLD MEADOW RD

City  
SAN DIEGO

State  
CA

Zip Code  
92111-4053

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2019

Transaction ID : AB0C7E458C6EC48BFBF1

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/PERRY/TRANS20191017

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

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

100.00