

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2048 OF 4510

(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**

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

**A. SAYLOR, MAURICE, , ,**

Mailing Address 12729 TAUSTIN LN

City  
HERNDONState  
VAZip Code  
20170-2979FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FATHOM REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	17	2019

**Transaction ID : ADD0567618EB94A50B2D**

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/ROSENDALE/TRANS20191023

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

**B. KRONBERG, KARL, , ,**

Mailing Address 838 ARNOLD RD

City  
LOWELLState  
OHZip Code  
45744-7195FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

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

**Transaction ID : ADD0EE4B6F5E64D298C8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/IVES/TRANS20191017

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

**C. ALEXSAVICH, BRUCE, , ,**

Mailing Address 71 WILLIAMS ST

City  
BRISTOLState  
CTZip Code  
06010-4143FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	15	2019

**Transaction ID : ADD162CC9D683464BACD**

Amount of Each Receipt this Period

20.00

☐ Memo Item

NOTE:EM/BISHOP/TRANS20191023

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

95.00

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