Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 11767 OF 11854
NAME OF COMMITTEE (In Fall)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) HOUSE FREEDOM FUND				FEC IDENTIFICATION NUMBER ▼
THOUSE I REEDOM I GITS				C C00552851
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee HOUSE FREEDOM FUND		☐ Memo	item = and	of Public Distribution/Dissemination
Mailing Address PO BOX 1948			Amou	
City	State	Zip Code		508.90
ALEXANDRIA	VA	22313		saction ID : EE9712CF753F243BDBDF of Disbursement or Obligation
Purpose of Expenditure IE-ROY-DONATION PROCESSING	Category/ Type			10 31 2018
Name of Federal Candidate:		<b>X</b> Support	Office Soug	ht: X House District: 21
ROY, CHIP, , ,		Oppose	Presid	TV
Calendar Year-To-Date Per Election for Office Sought	7	191384.15	Disburseme 2018	ent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
HOUSE FREEDOM FUND		_		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1948			Amou	
City	State	Zip Code	$ \Gamma$	4.50
ALEXANDRIA	VA	22313		nsaction ID : E4419A71C7D0A46D1B73 of Disbursement or Obligation
Purpose of Expenditure IE-BROOKS-DONATION PROCESSING		Category/ Type		10 31 2018
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: K House District: 05
BROOKS, MO, , ,		Oppose	Presid	Δ1
Calendar Year-To-Date Per Election for Office Sought	7	4033.63	Disburseme 2018	ont For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	i		· [	513.40
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
BROWN, MEGAN, , ,	[Flectronically Fil.	led1	M = M /	D D / Y Y Y Y Y Y

[Electronically Filed]

2018

06

12

Date