

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) HOUSE FREEDOM FUND	FEC IDENTIFICATION NUMBER ▼ C C00552851
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item HOUSE FREEDOM FUND		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 1948		Amount <input type="text"/>	
City ALEXANDRIA	State VA	Zip Code 22313	14.80
Purpose of Expenditure IE-MARK HARRIS-DONATION PROCESSING		Transaction ID : E02EDF3883C8A4B689EA	
Name of Federal Candidate: HARRIS, MARK, , ,		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		District: 09 State: NC	
5599.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item HOUSE FREEDOM FUND		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 1948		Amount <input type="text"/>	
City ALEXANDRIA	State VA	Zip Code 22313	32.30
Purpose of Expenditure IE-ROY-DONATION PROCESSING		Transaction ID : E1124FAF8ACE24950BF1	
Name of Federal Candidate: ROY, CHIP, , ,		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		District: 21 State: TX	
29557.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BROWN, MEGAN, , , [Electronically Filed] Date / /
Signature