

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 159 OF 1086

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JIM JORDAN FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CAPUTO, MICHAEL, M., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 08 / 28 / 2019		
Mailing Address 24956 LETCHWORTH RD			<b>Transaction ID : A34BAB1CEF01B40E99BB</b>		
City BEACHWOOD	State OH	Zip Code 44122-4151	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Name of Employer SELF-EMPLOYED			
Occupation BUSINESS OWNER		Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 300.00		<input type="checkbox"/> Memo Item EARMARKED (NON-DIRECTED) THROUGH HOUSE FREEDOM FUND			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HOUSE FREEDOM FUND</b>			Date of Receipt M M / D D / Y Y Y Y Y 08 / 28 / 2019		
Mailing Address PO BOX 1948			<b>Transaction ID : AD4C82E41C6C84A63924</b>		
City ALEXANDRIA	State VA	Zip Code 22313-1948	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C C00552851		Name of Employer Occupation			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 185305.67			
<input checked="" type="checkbox"/> Memo Item INTERMEDIARY			TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CARDILLO, LINDA, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2019		
Mailing Address 1041 THORTON CRK			<b>Transaction ID : A1D3740156145467DA4B</b>		
City GREENSBORO	State GA	Zip Code 30642-6458	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED			
Occupation RETIRED		Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 600.00		<input type="checkbox"/> Memo Item			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			_____ 150.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			_____		