

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

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

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ROAD TO FREEDOM POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Miriam Adelson

Mailing Address 410 S Rampart Blvd Ste 440

City Las Vegas State NV Zip Code 89145

FEC ID number of contributing federal political committee. **C**

Name of Employer The Adelson Clinic Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : SA11AI.5477

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Sheldon G Adelson

Mailing Address 410 S Rampart Blvd Ste 440

City Las Vegas State NV Zip Code 89145

FEC ID number of contributing federal political committee. **C**

Name of Employer Las Vegas Sands Corp Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : SA11AI.5475

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00