

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 1520

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. WARD, KATHLEEN, , ,

Mailing Address 89 OLD CREEK RD

City
PALOS PARK

State
IL

Zip Code
60464-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : A3E422DB971454B64BA9

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. MILLER, JANE, F., ,

Mailing Address PO BOX 136

City
DILLON BEACH

State
CA

Zip Code
94929-0136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : AA32E7C0E28B241E18BA

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. HALE, MARTIN, F., ,

Mailing Address 1162 SANDRA DR

City
MARIETTA

State
GA

Zip Code
30062-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : AB0B73F22491C4E7484F

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

250.00