

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
HOUSE FREEDOM FUND

ADDRESS (number and street) **PO BOX 1948**
Check if different than previously reported. (ACC) **ALEXANDRIA VA 22313**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00552851 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on **06 / 20 / 2017** in the State of **SC**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **01 / 01 / 2017** through **05 / 31 / 2017**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
BROWN, MEGAN, , ,
Type or Print Name of Treasurer

Signature of Treasurer **BROWN, MEGAN, , ,** [Electronically Filed] Date **06 / 08 / 2017**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		215982.68
(b) Cash on Hand at Beginning of Reporting Period.....	215982.68	
(c) Total Receipts (from Line 19)	734834.63	734834.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	950817.31	950817.31
7. Total Disbursements (from Line 31).....	729707.93	729707.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	221109.38	221109.38
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	615787.94	615787.94
(ii) Unitemized	43781.69	43781.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	659569.63	659569.63
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	69000.00	69000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	728569.63	728569.63
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1265.00	1265.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	734834.63	734834.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	734834.63	734834.63

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	231841.93	231841.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	231841.93	231841.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	495166.00	495166.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2700.00	2700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2700.00	2700.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	729707.93	729707.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	729707.93	729707.93

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	728569.63	728569.63
34. Total Contribution Refunds (from Line 28(d))	2700.00	2700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	725869.63	725869.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	231841.93	231841.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	231841.93	231841.93

**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 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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

A. ABERNETHY, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 PEPPERTREE CT
 City MARIETTA State GA Zip Code 30068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHASE PROFESSIONALS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2017
Transaction ID : SA11AI.20066
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. ABERNETHY, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 PEPPERTREE CT
 City MARIETTA State GA Zip Code 30068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2017
Transaction ID : SA11AI.20067
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. AIN, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 290101
 City NASHVILLE State TN Zip Code 37229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASURION CORPORATION Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20387
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 EM-MEADOWS-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 7 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. ALMOND, WENDEL, CLEON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 HARRIS LN
 City WHITEWRIGHT State TX Zip Code 75491
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11AI.20700
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. AMOS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 OCEAN CLUB DR
 City AMELIA ISLAND State FL Zip Code 32034
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2017
Transaction ID : SA11AI.20710
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. ANNAND, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 BEVERLY AVE
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED INFORMATION SCIENCES Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11AI.20924
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	6025.00
TOTAL This Period (last page this line number only).....	

**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 8 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. ARCHER, IRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6119 GREENVILLE AVE APT 623
 City DALLAS State TX Zip Code 75206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11AI.20680
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. BAREHAM, D.H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 987
 City RIVERSIDE State CA Zip Code 92502
 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 ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11AI.20929
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. BARRIER, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 HONEYWOOD CT
 City HOUSTON State TX Zip Code 77059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20667
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BAUGHMAN, CLIFFORD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6399 US HIGHWAY 36
 City SAINT PARIS State OH Zip Code 43072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 20 / 2017
Transaction ID : SA11AI.18775
 Amount of Each Receipt this Period 500.00
 Memo Item

B. BEAMAN, LEE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 BROADWAY
 City NASHVILLE State TN Zip Code 37203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEAMAN AUTOMOTIVE GROUP Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 19 / 2017
Transaction ID : SA11AI.19035
 Amount of Each Receipt this Period 1000.00
 Memo Item
 EM-JOHNSON-TRANS20170124

C. BEAMAN, LEE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 BROADWAY
 City NASHVILLE State TN Zip Code 37203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEAMAN AUTOMOTIVE GROUP Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11AI.20754
 Amount of Each Receipt this Period 2000.00
 Memo Item
 EM-NORMAN-TRANS20170516

SUBTOTAL of Receipts This Page (optional).....▶ 3500.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 10 OF 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BEAMAN, LEE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 BROADWAY
 City NASHVILLE State TN Zip Code 37203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEAMAN AUTOMOTIVE GROUP Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11AI.20733
 Amount of Each Receipt this Period 500.00
 Memo Item

B. BELDING, MAXWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOKUM RD APT 308
 City ESSEX State CT Zip Code 06426
 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 ▼ 500.00

Date of Receipt 03 / 13 / 2017
Transaction ID : SA11AI.20114
 Amount of Each Receipt this Period 500.00
 Memo Item

C. BHOOMA, PRAMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14480 ARNERICH RD
 City LOS GATOS State CA Zip Code 95032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNOPSIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20894
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....▶ 1010.00
TOTAL This Period (last page this line number only).....▶

**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 11 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BOVENMYER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 CROW CREEK CT
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11AI.20251
 Amount of Each Receipt this Period 400.00
 Memo Item

B. BRISTOR, BILL, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3621 BLUE HILL CT
 City ELLICOTT CITY State MD Zip Code 21042
 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 05 / 18 / 2017
Transaction ID : SA11AI.20812
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-NORMAN-TRANS20170522

C. BROKATE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 BAYSHORE DR
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 25 / 2017
Transaction ID : SA11AI.19082
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**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 12 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BROPHY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1185
 City JACKSON State WY Zip Code 83001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2017
Transaction ID : SA11AI.20065
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. BROPHY, CARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1185
 City JACKSON State WY Zip Code 83001
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2017
Transaction ID : SA11AI.20064
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. BURKLE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4642 FAMILY DR
 City HILLARD State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MH COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20899
 Amount of Each Receipt this Period
 4.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	10004.00
TOTAL This Period (last page this line number only).....	

**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 13 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BURTON, KONNI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 ELM ST
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TEXAS Occupation (for Individual) STATE SENATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11AI.20238
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. BUTTNER, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City PALOS VERDES ESTATES State CA Zip Code 90274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGFELLOW RESEARCH Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18784
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. CALANDRA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 KAPPA DR
 City PITTSBURGH State PA Zip Code 15238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENNMAR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2017
Transaction ID : SA11AI.20191
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

**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 14 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CAPPER, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BOUNTY RD E
 City BENBROOK State TX Zip Code 76132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11AI.20486
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. CAPPER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BOUNTY RD E
 City BENBROOK State TX Zip Code 76132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11AI.20485
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. CARTER, JANET, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16746 FM 1853
 City MORAN State TX Zip Code 76464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11AI.20848
 Amount of Each Receipt this Period 315.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10315.00
TOTAL This Period (last page this line number only).....	

**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 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CHAPPELEAR, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 TYLOR DR
 City COLUMBUS State OH Zip Code 43232
 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 ▼ 10.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11AI.20925
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. CHILDS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JW CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11AI.20232
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. CHILDS, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11AI.20233
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 10010.00
TOTAL This Period (last page this line number only).....▶

**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 16 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CHILDS, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **7700.00**

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11AI.20768
 Amount of Each Receipt this Period **2700.00**
 Memo Item
EM-NORMAN-TRANS20170516

B. CHILDS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **JW CHILDS ASSOCIATES** Occupation (for Individual) **CHAIRMAN**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **7700.00**

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11AI.20766
 Amount of Each Receipt this Period **2700.00**
 Memo Item
EM-NORMAN-TRANS20170516

C. CLYDE, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 PEBBLE DAWN
 City SAN ANTONIO State TX Zip Code 78232
 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 ▼ **240.00**

Date of Receipt **01 / 23 / 2017**
Transaction ID : SA11AI.19071
 Amount of Each Receipt this Period **240.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5640.00
TOTAL This Period (last page this line number only).....	

**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 17 OF 225
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. COPELAND, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 579
 City NEWARK State TX Zip Code 76071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.20660
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. COPELAND, K.M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 579
 City NEWARK State TX Zip Code 76071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED** Occupation (for Individual) **INFORMATION REQUESTED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.20659
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. CORELLI, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 80TH AVENUE CT E
 City FIFE State WA Zip Code 98424
 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 ▼ 15.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11AI.20930
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional)..... ▶ 2015.00
TOTAL This Period (last page this line number only)..... ▶

**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 18 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CORGAN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 LAKESHORE DR
 City DALLAS State TX Zip Code 75214
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11AI.20588
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. CORGAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 LAKESHORE DR
 City DALLAS State TX Zip Code 75214
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11AI.20589
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. COUNTS, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 ROB ROY CT
 City FRANKLIN State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELMONT UNIVERSITY COLLEGE OF LAW Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2017
Transaction ID : SA11AI.20704
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20866
 Amount of Each Receipt this Period 500.00
 Memo Item

B. COWLES, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N FAIRFAX ST APT 317
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWLES PARKWAY FORD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20901
 Amount of Each Receipt this Period 500.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. CRAIL, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 DUPONT DR STE 230
 City IRVINE State CA Zip Code 92612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN MUTUAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 30 / 2017
Transaction ID : SA11AI.19110
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 20 OF 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DAWSON, MAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 157
 City FULTON State TX Zip Code 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAG LADY Occupation (for Individual) GARBAGE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2017
Transaction ID : SA11AI.20183
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DAWSON, MAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 157
 City FULTON State TX Zip Code 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAG LADY Occupation (for Individual) GARBAGE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2017
Transaction ID : SA11AI.20185
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DAWSON, MAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 157
 City FULTON State TX Zip Code 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAG LADY Occupation (for Individual) GARBAGE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20673
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**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 21 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DAWSON, MAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 157
 City FULTON State TX Zip Code 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAG LADY Occupation (for Individual) GARBAGE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11AI.20678
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. DAWSON, MAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 157
 City FULTON State TX Zip Code 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAG LADY Occupation (for Individual) GARBAGE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11AI.20853
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. DEGROOTE, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2854 THREE SPRINGS DR
 City WESTLAKE VILLAGE State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEGROOTE FINANCIAL GROUP Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2017
Transaction ID : SA11AI.19869
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**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 22 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DEWEY, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1200 N VEITCH ST APT 815

City ARLINGTON	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) FDIC		Occupation (for Individual) RESOLUTION SPECIALIST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 09 / 2017
Transaction ID : SA11AI.20724

Amount of Each Receipt this Period
250.00

Memo Item

B. DEXTER, PENNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3705 STONINGTON DR

City PLANO	State TX	Zip Code 75093
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF		Occupation (for Individual) RADIO HOST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
04 / 19 / 2017
Transaction ID : SA11AI.20590

Amount of Each Receipt this Period
1000.00

Memo Item

C. DOCTER, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7778 BOCA RATON DR

City LAS VEGAS	State NV	Zip Code 89113
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 30 / 2017
Transaction ID : SA11AI.20911

Amount of Each Receipt this Period
100.00

Memo Item
EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**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 23 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DUNN, DENNIS, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City KIRKLAND	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTHOR
-------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2017

Transaction ID : SA11AI.19865

Amount of Each Receipt this Period
250.00

Memo Item

B. DUNN, DENNIS, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City KIRKLAND	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTHOR
-------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11AI.20734

Amount of Each Receipt this Period
100.00

Memo Item

C. ELDRED, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 WISTERIA WAY

City WESTLAKE	State TX	Zip Code 76262
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIVING STONES FOUNDATION	Occupation (for Individual) CEO
---------------------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2017

Transaction ID : SA11AI.20584

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**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 24 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 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

A. ELDRIDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1406 COUNTY HIGHWAY 14
 City MOUNT VISION State NY Zip Code 13810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20915
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. EVANS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CUMBERLAND DR
 City HENDERSONVILLE State TN Zip Code 37075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXT GENERATION UNDERWRITERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 06 / 2017
Transaction ID : SA11AI.20063
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. FEAGLES, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 SR 97
 City NARROWSBURG State NY Zip Code 12764
 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 ▼ 15.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20922
 Amount of Each Receipt this Period 15.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....▶ 1025.00
TOTAL This Period (last page this line number only).....▶

**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 25 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FENTRISS, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 TRUELOVE TRL
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAMILY OFFICE Occupation (for Individual) SENIOR ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11AI.20604
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. GABEL, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3664 S LAKESHORE DR
 City BYRNES MILL State MO Zip Code 63051
 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 ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11AI.20927
 Amount of Each Receipt this Period
 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. GABY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 OLD HOMESTEAD TRL
 City JOHNS CREEK State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GABY FOUNDATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11AI.20735
 Amount of Each Receipt this Period
 2700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3710.00
TOTAL This Period (last page this line number only).....	

**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 26 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. GABY, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 445 OLD HOMESTEAD TRL

City JOHNS CREEK	State GA	Zip Code 30097
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11AI.20755

Amount of Each Receipt this Period
2700.00

Memo Item
EM-NORMAN-TRANS20170516

B. GABY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 445 OLD HOMESTEAD TRL

City JOHNS CREEK	State GA	Zip Code 30097
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) GABY FOUNDATION
-------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11AI.20756

Amount of Each Receipt this Period
2700.00

Memo Item
EM-NORMAN-TRANS20170516

C. GALLAGHER, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3979 COUNTY ROAD 826

City ANNA	State TX	Zip Code 75409
--------------	-------------	-------------------

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

Name of Employer (for Individual) GALLAGHER CONST SERVICES	Occupation (for Individual) CONSULTANT
---------------------------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2017

Transaction ID : SA11AI.20489

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GAMBLE, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2017 Transaction ID : SA11AI.20587		
Mailing Address 2700 POLO LN			Amount of Each Receipt this Period 500.00		
City PLANO	State TX	Zip Code 75093	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SFMG WEALTH ADVISORS		Occupation (for Individual) INVESTMENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GOODMAN, JOHN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2017 Transaction ID : SA11AI.20600		
Mailing Address 6335 W NORTHWEST HWY STE 211			Amount of Each Receipt this Period 1000.00		
City DALLAS	State TX	Zip Code 75225	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GOODMAN INSTITUTE		Occupation (for Individual) PRESIDENT/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GORMAN, JAMES, , MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 20 / 2017 Transaction ID : SA11AI.18771		
Mailing Address PO BOX 2599 MANSFIELD			Amount of Each Receipt this Period 500.00		
City MANSFIELD	State OH	Zip Code 44906	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GORMAN RUPP		Occupation (for Individual) CHAIRMAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**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 28 OF 225
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HALL, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19376 HAZEL RD

City LEBANON	State MO	Zip Code 65536
-----------------	-------------	-------------------

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 ▼
25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20893

Amount of Each Receipt this Period
20.00

Memo Item
EM-NORMAN-TRANS20170531

B. HANCOCK, KENNETH, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 TREESIDE DR NW

City ROME	State GA	Zip Code 30165
--------------	-------------	-------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2017

Transaction ID : SA11AI.19218

Amount of Each Receipt this Period
200.00

Memo Item

C. HANSEN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address RIO MONDAY 185

City ASUNCION	State FL	Zip Code 34202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) ECONOMIST
-------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20920

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

**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 29 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HANSEN, GERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 W LINDEN AVE
 City FREMONT State NE Zip Code 68025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER-ACCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20896
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. HARMAN, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11891 FLANDERS CIR NE
 City BLAINE State MN Zip Code 55449
 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 ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20916
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. HART, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1349 E LYNDA LN
 City QUEEN VALLEY State AZ Zip Code 85118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18776
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**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 30 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HART, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1349 E LYNDA LN
 City QUEEN VALLEY State AZ Zip Code 85118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11AI.20692
 Amount of Each Receipt this Period 500.00
 Memo Item

B. HENDRICKSON, CHRISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 GOLDEN GATE DR
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11AI.20741
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. HENDRICKSON, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 GOLDEN GATE DR
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOKOMIS CAPITAL LLC Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11AI.20753
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-MEADOWS-TRANS20170516

SUBTOTAL of Receipts This Page (optional).....	8200.00
TOTAL This Period (last page this line number only).....	

**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 31 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HENDRICKSON, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 GOLDEN GATE DR
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOKOMIS CAPITAL LLC Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11AI.20740
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. HENRY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3508 EUCLID AVE
 City DALLAS State TX Zip Code 75205
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11AI.20679
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. HERSKER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67-69 PUBLIC SQ STE 1204
 City WILKES-BARRE State PA Zip Code 18701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11AI.20492
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

**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 32 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO	State CA	Zip Code 94590
-----------------	-------------	-------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20870

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINTON, MARILYN, , ,

Mailing Address 1005 MARIPOSA ST

City VALLEJO	State CA	Zip Code 94590
-----------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20912

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170531

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUDGENS, SUZANNE, M., ,

Mailing Address 6509 HIGHWAY 106 S

City HULL	State GA	Zip Code 30646
--------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11AI.20757

Amount of Each Receipt this Period
300.00

Memo Item
EM-NORMAN-TRANS20170516

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HUDSON, ART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9155 SLOANE ST
 City ORLANDO State FL Zip Code 32827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIDELITONE Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2017
Transaction ID : SA11AI.19711
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. HUMRICHOUSE, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8508 SAN FERNANDO WAY
 City DALLAS State TX Zip Code 75218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11AI.20481
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. HUMRICHOUSE, NINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8508 SAN FERNANDO WAY
 City DALLAS State TX Zip Code 75218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE GROUP Occupation (for Individual) EXECUTIVES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11AI.20504
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

**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 34 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. HURLEY, FRED, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 BROOKS DR APT 824
 City DISTRICT HEIGHTS State MD Zip Code 20747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. GOVERNMENT Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : SA11AI.20331
 Amount of Each Receipt this Period 500.00
 Memo Item

B. ILER, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11410 CARSON FIELD LANE
 City CYPRESS State TX Zip Code 77433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC ALLIANCE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1137.36

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11AI.21026
 Amount of Each Receipt this Period 1137.36
 Memo Item
 IN-KIND: FOOD FOR EVENT

C. JEMIOLA, JAMES, MICHAEL, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 GRANT AVE # B
 City REDONDO BEACH State CA Zip Code 90278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt **02 / 13 / 2017**
Transaction ID : SA11AI.19161
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4137.36
TOTAL This Period (last page this line number only).....	

**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 35 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. JONES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4228 SAN CARLOS ST
 City DALLAS State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACKHILL PARTNERS Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11AI.20599
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. JOYNER, CRAWLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 WEST SQUARE DRIVE
 City RICHMOND State VA Zip Code 23238
 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 ▼ 50.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11AI.20928
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. JUPPE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAURELTON AVE
 City LAKE GROVE State NY Zip Code 11755
 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 ▼ 50.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11AI.20926
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**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 36 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KAPETANSKY, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2599 SONATA DR
 City COLUMBUS State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11AI.20847
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EM-NORMAN-TRANS20170530

B. KATZ, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2017
Transaction ID : SA11AI.18925
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2017
Transaction ID : SA11AI.18924
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10100.00
TOTAL This Period (last page this line number only).....	

**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 37 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **01 / 23 / 2017**
Transaction ID : SA11AI.19057
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-BRAT-TRANS20170131

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **INVESTOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **01 / 23 / 2017**
Transaction ID : SA11AI.19056
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-BRAT-TRANS20170131

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **INVESTOR**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 37400.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : SA11AI.20376
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-AMASH-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 38 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20424
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-LABRADOR-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 113000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20466
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-GARRETT-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20264
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-MOONEY-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 39 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 53600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20400
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-JOHNSON-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 91400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20442
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-DESJARLAIS-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20370
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-HICE-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	16200.00
TOTAL This Period (last page this line number only).....▶	

**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 40 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 69800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20418
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-WEBER-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 107600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20460
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-YOHO-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20394
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-SANFORD-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	16200.00
TOTAL This Period (last page this line number only).....▶	

**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 41 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 86000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20436
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-DESANTIS-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20298
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-POSEY-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 64400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20411
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-GOSAR-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	16200.00
TOTAL This Period (last page this line number only).....▶	

**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 42 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 102200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20454
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-PEARCE-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 42800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20382
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-GOHMERT-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20430
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 EM-BLUM-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	16200.00
TOTAL This Period (last page this line number only).....▶	

**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 43 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 118400.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20472
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-DAVIDSON-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 21200.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20292
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-BIGGS-TRANS20170331

C. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 59000.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20406
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-BROOKS-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 44 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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

A. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 96800.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : SA11AI.20448
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-PERRY-TRANS20170331

B. KATZ, CARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HUGHES CENTER DR UNIT 1904
 City LAS VEGAS State NV Zip Code 89169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 121100.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : SA11AI.20758
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-NORMAN-TRANS20170516

C. KEINER, JUDITH, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9805 MCNEELY LAKE DR
 City LOUISVILLE State KY Zip Code 40229
 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 ▼ 20.00

Date of Receipt **05 / 30 / 2017**
Transaction ID : SA11AI.20909
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	8110.00
TOTAL This Period (last page this line number only).....	

**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 45 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KERG, JAMES, F., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FORAKER AVE
 City SIDNEY State OH Zip Code 45365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18870
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. KIELLEY, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1295 SHADOW MOUNTAIN DR
 City SUSANVILLE State CA Zip Code 96130
 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 ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20905
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. KIRK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6132 RAINBOW HEIGHTS RD
 City FALLBROOK State CA Zip Code 92028
 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 ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11AI.20759
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EM-NORMAN-TRANS20170516

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**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 46 OF 225
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KIRKPATRICK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28817 OXFORD RD
 City LOUISBURG State KS Zip Code 66053
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2017
Transaction ID : SA11AI.20110
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. KOHLS, CARL, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 MEADOW RD
 City SYRACUSE State NY Zip Code 13219
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2017
Transaction ID : SA11AI.19532
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. KOLOKOTRONES, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4236 WOODLEIGH LN
 City LA CANADA State CA Zip Code 91011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2017
Transaction ID : SA11AI.19081
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

**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 47 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. KOLOKOTRONES, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1449

City LA CANADA FLINTRIDGE	State CA	Zip Code 91012
------------------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11AI.20760

Amount of Each Receipt this Period
1000.00

Memo Item
EM-NORMAN-TRANS20170516

B. KOZUH, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3839 DRY CREEK DRIVE CONDO 136

City AUSTIN	State TX	Zip Code 78731
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTOR
-------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20891

Amount of Each Receipt this Period
50.00

Memo Item
EM-NORMAN-TRANS20170531

C. KRAUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 OLD DUBLIN RD

City PETERBOROUGH	State NH	Zip Code 03458
----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTMENT ADVISER
-------------------------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2017
Transaction ID : SA11AI.19500

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**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 48 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. LEE, KELLY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 488
 City MURCHISON State TX Zip Code 75778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11AI.20663
 Amount of Each Receipt this Period 3000.00
 Memo Item

B. LESTE, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3437 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029
 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 ▼ 350.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11AI.20250
 Amount of Each Receipt this Period 350.00
 Memo Item

C. LEWIS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3750 DUCHESS TRL
 City DALLAS State TX Zip Code 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11AI.20656
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4350.00
TOTAL This Period (last page this line number only)..... ▶

**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 49 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. LEWIS, KEET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3750 DUCHESS TRL
 City DALLAS State TX Zip Code 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20655
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. LINEHAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 S 38TH ST
 City NIXA State MO Zip Code 65714
 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 ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20917
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. LUDDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 PARAGON PARK RD
 City RALEIGH State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPTIVE-AIRE SYSTEMS, INC. Occupation (for Individual) CORPORATE EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2017
Transaction ID : SA11AI.19036
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 EM-JOHNSON-TRANS20170124

SUBTOTAL of Receipts This Page (optional).....	3725.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. LUDDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 PARAGON PARK RD
 City RALEIGH State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPTIVE-AIRE SYSTEMS, INC. Occupation (for Individual) CORPORATE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18773
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. LUDDY, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 PARAGON PARK RD
 City RALEIGH State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18777
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. LUDDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 PARAGON PARK RD
 City RALEIGH State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPTIVE-AIRE SYSTEMS, INC. Occupation (for Individual) CORPORATE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11AI.20814
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 EM-NORMAN-TRANS20170522

SUBTOTAL of Receipts This Page (optional).....	12700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MANNING, CAROL, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2352 MAGNOLIA LANE #4

City NAPLES	State FL	Zip Code 34112
----------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : SA11AI.20348

Amount of Each Receipt this Period
250.00

Memo Item

B. MARSHALL, CHARLES, L, , II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 337

City DAYTON	State OH	Zip Code 45401
----------------	-------------	-------------------

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

Name of Employer (for Individual) GRISMER TIRE	Occupation (for Individual) OWNER
---------------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2017

Transaction ID : SA11AI.19400

Amount of Each Receipt this Period
2500.00

Memo Item

C. MARTIN, LAUREL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1146 N CENTRAL AVE # 613

City GLENDALE	State CA	Zip Code 91202
------------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2017

Transaction ID : SA11AI.20192

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 52 OF 225
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MATTHEWS, J., W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 761384

City SAN ANTONIO	State TX	Zip Code 78245
---------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2017

Transaction ID : SA11AI.18821

Amount of Each Receipt this Period
500.00

Memo Item

B. MCCREIGHT, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7706 ROYAL AZALEA CT

City SPRINGFIELD	State VA	Zip Code 22153
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2017

Transaction ID : SA11AI.20811

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170522

C. MCCREIGHT, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7706 ROYAL AZALEA CT

City SPRINGFIELD	State VA	Zip Code 22153
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
150.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2017

Transaction ID : SA11AI.20900

Amount of Each Receipt this Period
50.00

Memo Item
EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCQUILLAN, KARIN, , ,		Date of Receipt
Mailing Address 1400 QUEENS LN		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2017"/>
City JACKSON	State WY	Zip Code 83001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20176
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCQUILLAN, KARIN, , ,		Date of Receipt
Mailing Address 1400 QUEENS LN		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2017"/>
City JACKSON	State WY	Zip Code 83001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20602
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCQUILLAN, KARIN, , ,		Date of Receipt
Mailing Address 1400 QUEENS LN		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2017"/>
City JACKSON	State WY	Zip Code 83001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20802
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 54 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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

A. MCQUILLAN, KARIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 QUEENS LN
 City JACKSON State WY Zip Code 83001
 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 ▼ 850.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11AI.20803
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MELTZER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 CORPORATE DR STE 110
 City FORT LAUDERDALE State FL Zip Code 33334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MELTZER GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 30 / 2017
Transaction ID : SA11AI.19109
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. MEYER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 RAVENWOOD TRAIL
 City SIDNEY State OH Zip Code 45365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SMS GROUP Occupation (for Individual) OWNER/MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 03 / 21 / 2017
Transaction ID : SA11AI.20105
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-DAVIDSON-TRANS20170321

SUBTOTAL of Receipts This Page (optional).....	7950.00
TOTAL This Period (last page this line number only).....	

**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 55 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MEYER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 RAVENWOOD TRAIL
 City SIDNEY State OH Zip Code 45365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SMS GROUP Occupation (for Individual) OWNER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3200.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20902
 Amount of Each Receipt this Period 500.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. MIDDLETON, DAVID, MAYES, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 273
 City WALLISVILLE State TX Zip Code 77597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDDLETON OIL CO Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11AI.20703
 Amount of Each Receipt this Period 4948.58
 Memo Item

C. MILLER, ANDREW, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BURTON HILLS BLVD STE 325
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHMARK VENTURES Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11AI.20761
 Amount of Each Receipt this Period 1000.00
 Memo Item
 EM-NORMAN-TRANS20170516

SUBTOTAL of Receipts This Page (optional).....	6448.58
TOTAL This Period (last page this line number only).....	

**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 56 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MITCHELL, TANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12400 COIT RD
 STE 800
 City DALLAS State TX Zip Code 75251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **621.87**

Date of Receipt **04 / 18 / 2017**
Transaction ID : SA11AI.20716
 Amount of Each Receipt this Period **621.87**
 Memo Item
PAC IN-KIND: FOOD, WINE AND SERVER

B. MITCHELL, N. MALONE, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4321 SAINT JOHNS DR
 City DALLAS State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **INVESTOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.20658
 Amount of Each Receipt this Period **2500.00**
 Memo Item

C. MITCHELL, AMY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4321 SAINT JOHNS DR
 City DALLAS State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.20657
 Amount of Each Receipt this Period **2500.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5621.87
TOTAL This Period (last page this line number only).....	

**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 57 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MITCHELL, TANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12400 COIT RD
 STE 800
 City DALLAS State TX Zip Code 75251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **05 / 08 / 2017**
Transaction ID : SA11AI.20738
 Amount of Each Receipt this Period **4378.13**
 Memo Item

B. MITCHELL, LEE ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12400 COIT RD
 STE 800
 City DALLAS State TX Zip Code 75251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **CINEMARK, USA** Occupation (for Individual) **CHAIRMAN OF BOARD**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **05 / 08 / 2017**
Transaction ID : SA11AI.20739
 Amount of Each Receipt this Period **5000.00**
 Memo Item

C. MONTGOMERY, JAMES, MARK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13405 FORESTWAY DR
 City DALLAS State TX Zip Code 75240
 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 ▼ **1000.00**

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.20662
 Amount of Each Receipt this Period **1000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **10378.13**

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

**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 58 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MOONEY, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 GREENBRIAR AVE
 ORMOND BEACH
 City ORMOND BEACH State FL Zip Code 32174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2017
Transaction ID : SA11AI.18927
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. MOORE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5361 LIVINGSTON AVE
 City DALLAS State TX Zip Code 75209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTERTAINMENT SERVICES, LLC Occupation (for Individual) PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11AI.20601
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. MORGAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 DEL RIO PIKE
 City FRANKLIN State TN Zip Code 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN BOUCHARD & SONS CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017
Transaction ID : SA11AI.20810
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EM-NORMAN-TRANS20170522

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. NAEGELE, ELLIS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7993 VIA VECCHIA
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 23 / 2017**
Transaction ID : SA11AI.19066
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. NAEGELE, ROBERT, O., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7993 VIA VECCHIA
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **INVESTOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 23 / 2017**
Transaction ID : SA11AI.19064
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. NAEGELE, ELLIS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7993 VIA VECCHIA
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : SA11AI.20737
 Amount of Each Receipt this Period 500.00
 Memo Item
REFUND PENDING

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00
TOTAL This Period (last page this line number only).....▶

**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 60 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. NAEGELE, ROBERT, O., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7993 VIA VECCHIA
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11AI.20762
 Amount of Each Receipt this Period 500.00
 Memo Item
 EM-NORMAN-TRANS20170516

B. NEECE, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 E HICKORY HILL RD
 City ARGYLE State TX Zip Code 76226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11AI.20598
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. NICHOLAS, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831
 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 ▼ 500.00

Date of Receipt 02 / 15 / 2017
Transaction ID : SA11AI.19221
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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 61 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. NOLAN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 101835
 City FORT WORTH State TX Zip Code 76185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOLAN CAPITAL LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11AI.20493
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. NORD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6256 SHADYSIDE DRIVE
 City VERMILION State OH Zip Code 44089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDSCAPE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11AI.20763
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EM-NORMAN-TRANS20170516

C. PASSAMANTE, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 969 SCARLET OAK DR
 City CHALFONT State PA Zip Code 18914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20898
 Amount of Each Receipt this Period
 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	3010.00
TOTAL This Period (last page this line number only).....	

**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 62 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PATRICK, THOMAS, , ,

Mailing Address 9723 NIBLICK LN

City NAPLES	State FL	Zip Code 34108
----------------	-------------	-------------------

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

Name of Employer (for Individual) NEW VERNON CAPITAL	Occupation (for Individual) INVESTMENT MANAGER
---------------------------------------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2017

Transaction ID : SA11AI.20307

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PATRICK, THOMAS, , ,

Mailing Address 9723 NIBLICK LN

City NAPLES	State FL	Zip Code 34108
----------------	-------------	-------------------

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

Name of Employer (for Individual) NEW VERNON CAPITAL	Occupation (for Individual) INVESTMENT MANAGER
---------------------------------------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2017

Transaction ID : SA11AI.20306

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PATRICK, THOMAS, , ,

Mailing Address 9723 NIBLICK LN

City NAPLES	State FL	Zip Code 34108
----------------	-------------	-------------------

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

Name of Employer (for Individual) NEW VERNON CAPITAL	Occupation (for Individual) INVESTMENT MANAGER
---------------------------------------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
18500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : SA11AI.20303

Amount of Each Receipt this Period
2700.00

Memo Item
EM-BRAT-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	10400.00
TOTAL This Period (last page this line number only).....▶	

**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 63 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20263
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-MOONEY-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32000.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20393
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-SANFORD-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 42800.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20417
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-WEBER-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....▶	8100.00
TOTAL This Period (last page this line number only).....▶	

**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 64 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 61700.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20459
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-YOHO-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 21200.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20369
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-HICE-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40100.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20412
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-GOSAR-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 65 OF 225
(check only one)
 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

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW VERNON CAPITAL INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20435
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 EM-DESANTIS-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW VERNON CAPITAL INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20297
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 EM-POSEY-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW VERNON CAPITAL INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 29300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20388
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 EM-MEADOWS-TRANS20170331

SUBTOTAL of Receipts This Page (optional)..... ▶ 8100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 59000.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20453
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-PEARCE-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37400.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20405
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-BROOKS-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48200.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20429
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-BLUM-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

**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 67 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 67100.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20471
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-DAVIDSON-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 13100.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20291
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-BIGGS-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26600.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20381
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-GOHMERT-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

**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 68 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 56300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20447
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-PERRY-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 34700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20399
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-JOHNSON-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20423
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-LABRADOR-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

**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 69 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 64400.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20465
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-GARRETT-TRANS20170331

B. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 23900.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20375
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-AMASH-TRANS20170331

C. PATRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 NIBLICK LN
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW VERNON CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 53600.00

Date of Receipt 03 / 31 / 2017
Transaction ID : SA11AI.20441
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-DESJARLAIS-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

**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 70 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. PEDERSON, IRENE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 SUNNYSIDE AVE
PLENTYWOOD

City PLENTYWOOD State MT Zip Code 59254

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 ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2017

Transaction ID : SA11AI.19214

Amount of Each Receipt this Period
500.00

Memo Item

B. PEREZ, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 185 DROMS RD

City GLENVILLE State NY Zip Code 12302

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 ▼
50.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2017

Transaction ID : SA11AI.20931

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170531

C. PETRONE, AUGUSTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1037

City DUBLIN State NH Zip Code 03444

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 ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2017

Transaction ID : SA11AI.19196

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

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

**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 71 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 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

A. PETTIT, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 GLEN VIEW PL
 City BONITA State CA Zip Code 91902
 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 ▼ 150.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20910
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. PHILLIPS, ROXANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10300 GAYWOOD RD
 City DALLAS State TX Zip Code 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11AI.20605
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. PHILLIPS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10300 GAYWOOD RD
 City DALLAS State TX Zip Code 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATIONAL PAYROLL MANAGEMENT Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11AI.20665
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 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

A. POPP, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12316 ABOITE CENTER RD
 City FORT WAYNE State IN Zip Code 46814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFECTION BAKERIES INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2017
Transaction ID : SA11AI.20124
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PORTIER, ELAINE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15770 SW TOWHEE LN
 City BEAVERTON State OR Zip Code 97007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20897
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. RAHE, ELEANOR, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 CANNINGTON CT
 City COLUMBUS State OH Zip Code 43229
 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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11AI.20336
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 73 OF 225
(check only one)
 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

A. RAMSLAND, RUSSELL, J., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6339 DESCO DR
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20653
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. RAMSLAND, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8523 THACKERY ST APT 9114
 City DALLAS State TX Zip Code 75225
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20652
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. RAMSLAND, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6339 DESCO DR
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20654
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**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 74 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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

A. REMINGTON, JAMES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2671 TRELIS GREEN CIR
City HENRICO State VA Zip Code 23233
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 ▼ 750.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11AI.20806
Amount of Each Receipt this Period 750.00
 Memo Item

B. REX, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2816 NORTHLAKE DR
City RICHMOND State VA Zip Code 23233
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 ▼ 100.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20913
Amount of Each Receipt this Period 50.00
 Memo Item
EM-NORMAN-TRANS20170531

C. RHOAD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1037 GLENN AVE
City WASHINGTON COURT HOUSE State OH Zip Code 43160
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 ▼ 100.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20906
Amount of Each Receipt this Period 100.00
 Memo Item
EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**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 75 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. RINDLAUB, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 SE 68TH ST. #217

City MERCER ISLAND	State WA	Zip Code 98040
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2017

Transaction ID : SA11AI.19037

Amount of Each Receipt this Period
500.00

Memo Item
EM-JOHNSON-TRANS20170124

B. RINDLAUB, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 SE 68TH ST. #217

City MERCER ISLAND	State WA	Zip Code 98040
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2017

Transaction ID : SA11AI.18780

Amount of Each Receipt this Period
500.00

Memo Item

C. RINDLAUB, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 SE 68TH ST. #217

City MERCER ISLAND	State WA	Zip Code 98040
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2017

Transaction ID : SA11AI.20204

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 76 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RINDLAUB, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 SE 68TH ST. #217
 City MERCER ISLAND State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20907
 Amount of Each Receipt this Period 500.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. RINDLAUB, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 SE 68TH ST. #217
 City MERCER ISLAND State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3250.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20876
 Amount of Each Receipt this Period 250.00
 Memo Item

C. RIORDAN, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 KING FISHER DR
 City WESTLAKE State TX Zip Code 76262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIORDAN MCKENNA INSTITUTE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11AI.20597
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RUTHERFORD, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5568 CANDLEWOOD
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1558.46

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11AI.20723
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. RYDIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5500 HOLLY ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCSS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 01 / 2017
Transaction ID : SA11AI.19114
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. RYDIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5500 HOLLY ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCSS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11AI.20767
 Amount of Each Receipt this Period 2000.00
 Memo Item
 EM-NORMAN-TRANS20170516

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00
TOTAL This Period (last page this line number only)..... ▶

**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 78 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCANLON, HENRY, , ,		Date of Receipt
Mailing Address 837 PONTE VEDRA BLVD		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
City PONTE VEDRA BEACH	State FL	Zip Code 32082
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.19115
Name of Employer (for Individual) SELF		Amount of Each Receipt this Period
Occupation (for Individual) WRITER		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="1000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHLECH, BARRY, A., DR.,		Date of Receipt
Mailing Address 3550 COUNTRY VISTA DR		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2017"/>
City BURLESON	State TX	Zip Code 76028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20484
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period
Occupation (for Individual) RETIRED		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHLECH, BARRY, A., DR.,		Date of Receipt
Mailing Address 3550 COUNTRY VISTA DR		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City BURLESON	State TX	Zip Code 76028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20874
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period
Occupation (for Individual) RETIRED		<input type="text" value="56.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="5056.00"/>		REFUND PENDING

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6056.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 79 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SCHLECH, BARRY, A., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3550 COUNTRY VISTA DR

City BURLESON	State TX	Zip Code 76028
------------------	-------------	-------------------

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 ▼
5168.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20918

Amount of Each Receipt this Period
112.00

Memo Item
EM-NORMAN-TRANS20170531

B. SCOTT, JOHN, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---------------------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2017

Transaction ID : SA11AI.20795

Amount of Each Receipt this Period
250.00

Memo Item

C. SCOTT, JOHN, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City LAKE DELTON	State WI	Zip Code 53940
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SCOTT CONSTRUCTION, INC.	Occupation (for Individual) EXECUTIVE
---------------------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2017

Transaction ID : SA11AI.20809

Amount of Each Receipt this Period
250.00

Memo Item
EM-NORMAN-TRANS20170522

SUBTOTAL of Receipts This Page (optional).....	612.00
TOTAL This Period (last page this line number only).....	

**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 80 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SCOTT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 E LAKE HAZEL RD
 City MERIDIAN State ID Zip Code 83642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLIOT SCOTT EARTHMOVING, INC Occupation (for Individual) ESTIMATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20895
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. SEMLER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32111 MULHOLLAND HIGHAY
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEMLER MALIBU ESTATES VINEYARDS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 27 / 2017
Transaction ID : SA11AI.19709
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. SHAGNEA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 E KARI CT
 City SAINT JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11AI.20923
 Amount of Each Receipt this Period 25.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00
TOTAL This Period (last page this line number only).....▶

**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 81 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SHEPHERD, ALLEN, S., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6295 COSGRAY RD
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 23 / 2017
Transaction ID : SA11AI.19063
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. SHIPE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LOMBARDY TER BENBROOK
 City BENBROOK State TX Zip Code 76132
 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 02 / 13 / 2017
Transaction ID : SA11AI.19149
 Amount of Each Receipt this Period 300.00
 Memo Item

C. SMIGA, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 SWEEPING MIST CIRCLE
 City FREDERICA State DE Zip Code 19946
 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 ▼ 20.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20908
 Amount of Each Receipt this Period 10.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	5310.00
TOTAL This Period (last page this line number only).....	

**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 82 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SNYDER, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12382 STATE HIGHWAY F
 City TARKIO State MO Zip Code 64491
 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 ▼ 5.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20892
 Amount of Each Receipt this Period
 5.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. SPEAKE, SHANDELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HAYNES RD
 City ROANOKE State TX Zip Code 76262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11AI.20239
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. SPEAKE, HARRY, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HAYNES RD
 City ROANOKE State TX Zip Code 76262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11AI.20240
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10005.00
TOTAL This Period (last page this line number only).....	

**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 83 OF 225
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. STAI, DIAN, GRAVES, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1286 CHERRY SPRING RD
 City FREDERICKSBURG State TX Zip Code 78624
 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 ▼ 5000.00

Date of Receipt 01 / 25 / 2017
Transaction ID : SA11AI.19067
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. STAMPLEY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 797927
 City DALLAS State TX Zip Code 75379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11AI.20603
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. STREET, ERNEST, GENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12200 N STEMMONS FWY STE 100
 City DALLAS State TX Zip Code 75234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11AI.20661
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

**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 84 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. STROH, KERMIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3756 SHALLOWAY DR
 City LIMA State OH Zip Code 45806
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2017
Transaction ID : SA11AI.18813
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. STROH, KERMIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3756 SHALLOWAY DR
 City LIMA State OH Zip Code 45806
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2017
Transaction ID : SA11AI.19065
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. TAYLOR, LARRY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12400 COIT RD STE 850
 City DALLAS State TX Zip Code 75251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LAND DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11AI.20629
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**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 85 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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

A. TOPPER, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 CAMP MINEOLA RD
 City MATTITUCK State NY Zip Code 11952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAST FOOD SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 31 / 2017
Transaction ID : SA11AI.19111
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. TRENTO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14325 MANCHESTER DR
 City NAPLES State FL Zip Code 34114
 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 ▼ 150.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20903
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. TSAI, AMY, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 CALVARY DR
 City LANCASTER State PA Zip Code 17601
 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 ▼ 500.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11AI.20804
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 86 OF 225
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. TURNER, JACK, E., MR., SR.
Mailing Address 2326 SW 122ND ST
City OKLAHOMA CITY State OK Zip Code 73170
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 1000.00

Date of Receipt 03 / 06 / 2017
Transaction ID : SA11AI.20062
Amount of Each Receipt this Period 1000.00
Memo Item

B. UIHLEIN, RICHARD, , ,
Mailing Address 1396 N. WAUKEGAN RD
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 01 / 20 / 2017
Transaction ID : SA11AI.18770
Amount of Each Receipt this Period 5000.00
Memo Item

C. UIHLEIN, ELIZABETH, , ,
Mailing Address 1396 N WAUKEGAN RD
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) ULINE Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 01 / 20 / 2017
Transaction ID : SA11AI.18785
Amount of Each Receipt this Period 5000.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 11000.00
TOTAL This Period (last page this line number only)

**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 87 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20515
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-POSEY-TRANS20170412

B. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 69800.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20522
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-GOSAR-TRANS20170412

C. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 107600.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20529
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-YOHO-TRANS20170412

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 88 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017

Transaction ID : SA11AI.20511

Amount of Each Receipt this Period
5400.00

Memo Item
EM-MOONEY-TRANS20170412

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017

Transaction ID : SA11AI.20518

Amount of Each Receipt this Period
5400.00

Memo Item
EM-MEADOWS-TRANS20170412

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
86000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017

Transaction ID : SA11AI.20525

Amount of Each Receipt this Period
5400.00

Memo Item
EM-BLUM-TRANS20170331

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 89 OF 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. UIHLEIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20514

Amount of Each Receipt this Period
5400.00

Memo Item
EM-HICE-TRANS20170412

B. UIHLEIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
64400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20521

Amount of Each Receipt this Period
5400.00

Memo Item
EM-BROOKS-TRANS20170412

C. UIHLEIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
102200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20528

Amount of Each Receipt this Period
5400.00

Memo Item
EM-PEARCE-TRANS20170412

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 90 OF 225
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20517

Amount of Each Receipt this Period
5400.00

Memo Item
EM-GOHMERT-TRANS20170331

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
80600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20524

Amount of Each Receipt this Period
5400.00

Memo Item
EM-LABRADOR-TRANS20170412

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, , ,

Mailing Address 1396 N. WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ULINE	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
21200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11AI.20513

Amount of Each Receipt this Period
5400.00

Memo Item
EM-DAVIDSON-TRANS20170412

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 91 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 59000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20520
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-JOHNSON-TRANS20170412

B. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 96800.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20527
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-PERRY-TRANS20170412

C. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37400.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20516
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-AMASH-TRANS20170412

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 92 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75200.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20523
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-WEBER-TRANS20170412

B. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 113000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20530
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-GARRETT-TRANS20170412

C. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15800.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20512
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-BIGGS-TRANS20170412

SUBTOTAL of Receipts This Page (optional).....	16200.00
TOTAL This Period (last page this line number only).....	

**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 93 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 53600.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20519
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-SANFORD-TRANS20170412

B. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 91400.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11AI.20526
 Amount of Each Receipt this Period 5400.00
 Memo Item
 EM-DESJARLAIS-TRANS20170412

C. WALLIS, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 SUMMERFIELD DR
 City RICHARDSON State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WS GROUP Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11AI.20487
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15800.00
TOTAL This Period (last page this line number only).....	

**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 94 OF 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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

A. WALLIS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 SUMMERFIELD DR
 City RICHARDSON State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 11 / 2017**
Transaction ID : SA11AI.20503
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. WELKER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10155 GROVE LN
 City COOPER CITY State FL Zip Code 33328
 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 ▼ 250.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : SA11AI.19822
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WELKER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10155 GROVE LN
 City COOPER CITY State FL Zip Code 33328
 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 ▼ 450.00

Date of Receipt **05 / 18 / 2017**
Transaction ID : SA11AI.20813
 Amount of Each Receipt this Period 100.00
 Memo Item
 EM-NORMAN-TRANS20170522

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**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 95 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. WELKER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10155 GROVE LN
 City COOPER CITY State FL Zip Code 33328
 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 ▼ 350.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11AI.20801
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WELKER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10155 GROVE LN
 City COOPER CITY State FL Zip Code 33328
 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 ▼ 600.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20914
 Amount of Each Receipt this Period 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

C. WELKER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10155 GROVE LN
 City COOPER CITY State FL Zip Code 33328
 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 ▼ 550.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11AI.20872
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. WERTS, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4431 BERNARD ST
 City LAKE OSWEGO State OR Zip Code 97035
 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 ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11AI.20904
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EM-NORMAN-TRANS20170531

B. WILLIS, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11761 OAKWOOD LN
 City FORT WORTH State TX Zip Code 76179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN ONE SOURCE Occupation (for Individual) TRUCKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : SA11AI.20237
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. WILMETH, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HUNTERS CREEK DR
 City LONGVIEW State TX Zip Code 75605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOT INDUSTRIES Occupation (for Individual) EVENT PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2017
Transaction ID : SA11AI.19497
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 97 OF 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. WILSON, ANDREW, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11163 RICH MEADOW DR
 City GREAT FALLS State VA Zip Code 22066
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2017
Transaction ID : SA11AI.20084
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. WITHERSPOON, MARJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 ORCHID LN
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11AI.20664
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. WITTEN, TISH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3912 BRYN MAWR DR
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WITTEN ADVISORS Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : SA11AI.20488
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. WOODWARD, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 S UNIVERSITY BLVD UNIT 150

City DENVER	State CO	Zip Code 80210
----------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20919

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170531

B. WRIGHT, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 GAMBIER RD

City MOUNT VERNON	State OH	Zip Code 43050
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ARIEL CORPORATION	Occupation (for Individual) PRESIDENT AND CEO
--------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11AI.20764

Amount of Each Receipt this Period
2700.00

Memo Item
EM-NORMAN-TRANS20170516

C. ZAZULAK, PAULINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3861 PARK BLVD

City OAKLAND	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SMALL APPARTMENT RENTAL
-------------------------------------------	--------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11AI.20921

Amount of Each Receipt this Period
25.00

Memo Item
EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**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 99 OF 225
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. ZULUETA, LAURA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 GREYHAWK PL
 City APEX State NC Zip Code 27539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 10 / 2017**
Transaction ID : SA11AI.20085
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. ZULUETA, LAURA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 GREYHAWK PL
 City APEX State NC Zip Code 27539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : SA11AI.20765
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-NORMAN-TRANS20170516

C. ZULUETA, EMMANUEL, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 GREYHAWK PL
 City APEX State NC Zip Code 27539
 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 ▼ 2700.00

Date of Receipt **05 / 30 / 2017**
Transaction ID : SA11AI.20932
 Amount of Each Receipt this Period 2700.00
 Memo Item
 EM-NORMAN-TRANS20170531

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	615787.94

**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 100 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BRAT PAC

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

Mailing Address 4921 PUMA WAY

City CARMICHAEL	State CA	Zip Code 95608
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00564153

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : SA11C.19113

Amount of Each Receipt this Period
5000.00

Memo Item

B. COMMUNITY BANCSHARES OF MISSISSIPPI INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1255 W GOVERNMENT ST

City BRANDON	State MS	Zip Code 39043
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00228924

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2017

Transaction ID : SA11C.19034

Amount of Each Receipt this Period
1000.00

Memo Item
EM-JOHNSON-TRANS20170124

C. DAVIDSON FOR CONGRESS

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

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD	State OH	Zip Code 45014
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00600718

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : SA11C.19108

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**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 101 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DR. BRIAN BABIN FOR CONGRESS

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

Mailing Address PO BOX 159

City WOODVILLE	State TX	Zip Code 75979
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00553859

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19025

Amount of Each Receipt this Period
5000.00

Memo Item

B. FRIENDS OF BILL POSEY

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

Mailing Address P. O. BOX 411486

City MELBOURNE	State FL	Zip Code 32941
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00444968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19026

Amount of Each Receipt this Period
5000.00

Memo Item

C. FRIENDS OF DAVE BRAT INC.

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

Mailing Address PO BOX 5094

City GLEN ALLEN	State VA	Zip Code 23058
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00554949

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19027

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 102 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GREAT AMERICA PAC		Date of Receipt
Mailing Address 107 S WEST ST STE 555		<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2017"/>
City ALEXANDRIA	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00608489"/>		Transaction ID : SA11C.19024
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GREAT AMERICA PAC		Date of Receipt
Mailing Address 107 S WEST ST STE 555		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2017"/>
City ALEXANDRIA	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00608489"/>		Transaction ID : SA11C.19100
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="-5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CHARGEBACK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JIM BANKS FOR CONGRESS, INC.		Date of Receipt
Mailing Address P.O. BOX 11431		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City FORT WAYNE	State IN	Zip Code 46858
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00577999"/>		Transaction ID : SA11C.19059
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="2500.00"/>

**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 103 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. JODY HICE FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 586

City MONROE	State GA	Zip Code 30655
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00544445

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2017

Transaction ID : SA11C.18718

Amount of Each Receipt this Period
5000.00

Memo Item

B. JUSTIN AMASH FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS	State MI	Zip Code 49506
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FEC ID number of contributing federal political committee. **C** C00476291

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19028

Amount of Each Receipt this Period
5000.00

Memo Item

C. LONGHORN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00402602

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2017

Transaction ID : SA11C.20231

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 104 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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. LUMMIS FOR CONGRESS

Mailing Address **PO BOX 52188**

City CASPER	State WY	Zip Code 82605
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00443580**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
01 / 20 / 2017

Transaction ID : SA11C.19029

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MAKE OPPORTUNITY POLITICAL ACTION COMMITTEE

Mailing Address **7610 FOXFIRE DRIVE**

City HUNTSVILLE	State AL	Zip Code 35802
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00524611**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
01 / 20 / 2017

Transaction ID : SA11C.19030

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MIKE JOHNSON FOR LOUISIANA

Mailing Address **2900 CLEARVIEW PKWY
SUITE 206**

City METAIRIE	State LA	Zip Code 70006
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00608695**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
01 / 31 / 2017

Transaction ID : SA11C.19058

Amount of Each Receipt this Period
3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	13000.00
TOTAL This Period (last page this line number only).....	

**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 105 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MORGAN GRIFFITH FOR CONGRESS

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

Mailing Address PO BOX 361

City CHRISTIANSBURG	State VA	Zip Code 24068
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00477240

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19031

Amount of Each Receipt this Period
5000.00

Memo Item

B. PATRIOTS FOR PERRY

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

Mailing Address PO BOX 147

City RED LION	State PA	Zip Code 17356
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00510164

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19032

Amount of Each Receipt this Period
5000.00

Memo Item

C. TED BUDD FOR CONGRESS

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

Mailing Address 321 MAPLEWOOD LANE

City ADVANCE	State NC	Zip Code 27006
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00614776

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2017

Transaction ID : SA11C.19033

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	69000.00

**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 106 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MIKE JOHNSON FOR LOUISIANA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

FEC ID number of contributing federal political committee. **C** C00608695

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4265.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2017

Transaction ID : SA17.19126

Amount of Each Receipt this Period
1265.00

Memo Item
PAC FUNDRAISING SERVICES

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1265.00
TOTAL This Period (last page this line number only).....▶	1265.00

**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 107 OF 225
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BIGGS FOR CONGRESS

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00610451

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : SA16.20721

Amount of Each Receipt this Period
5000.00

Memo Item
REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ALLEGIANCE DIRECT LLC

Mailing Address 15 N. KING ST. STE. 205

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19427
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN CAGING, INC.

Mailing Address 4850 WRIGHT RD
STE 168

City STAFFORD State TX Zip Code 77477

Purpose of Disbursement
PAC CAGING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19096
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN CAGING, INC.

Mailing Address 4850 WRIGHT RD
STE 168

City STAFFORD State TX Zip Code 77477

Purpose of Disbursement
PAC CAGING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.2010c
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. AMERICAN CAGING, INC.

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address: 4850 WRIGHT RD
STE 168

City: STAFFORD State: TX Zip Code: 77477

Purpose of Disbursement: PAC CAGING
Candidate Name: []
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

FEC Identification Number: C []
Transaction ID : SB21B.20222
Amount of Each Disbursement this Period: 362.59
 Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN CAGING, INC.

Date of Disbursement: MM / DD / YYYY
05 / 12 / 2017

Mailing Address: 4850 WRIGHT RD
STE 168

City: STAFFORD State: TX Zip Code: 77477

Purpose of Disbursement: PAC CAGING
Candidate Name: []
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

FEC Identification Number: C []
Transaction ID : SB21B.20789
Amount of Each Disbursement this Period: 294.67
 Memo Item

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

Date of Disbursement: MM / DD / YYYY
01 / 03 / 2017

Mailing Address: 50TH, 200 VESEY ST

City: NEW YORK State: NY Zip Code: 10285

Purpose of Disbursement: SEE MEMO ENTRIES
Candidate Name: []
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

FEC Identification Number: C []
Transaction ID : SB21B.18745
Amount of Each Disbursement this Period: 10728.02
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11385.28

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
PAC AIRFARE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

Transaction ID : SB21B.18746
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ALASKA AIRLINES

Mailing Address PO BOX 13670

City DES MOINES State WA Zip Code 98198

Purpose of Disbursement
PAC AIRFARE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

Transaction ID : SB21B.18747
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. THE LIAISON CAPITOL HILL

Mailing Address 415 NEW JERSEY AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
PAC EVENT FACILITY RENTAL

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

Transaction ID : SB21B.18751
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B.18755
 Amount of Each Disbursement this Period
 669.99

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement PAC POSTAGE

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B.18758
 Amount of Each Disbursement this Period
 600.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2017

FEC Identification Number

C
Transaction ID : SB21B.18728
 Amount of Each Disbursement this Period
 15761.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

16431.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. SHERATON

Date of Disbursement: MM / DD / YYYY
01 / 17 / 2017

Mailing Address ONE STARPOINT

City STAMFORD State CT Zip Code 06902

Purpose of Disbursement PAC LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.18733
Amount of Each Disbursement this Period: 494.46

Memo Item

Full Name (Last, First, Middle Initial)
B. THE LIAISON CAPITOL HILL

Date of Disbursement: MM / DD / YYYY
01 / 17 / 2017

Mailing Address 415 NEW JERSEY AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement PAC EVENT FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.18734
Amount of Each Disbursement this Period: 14993.70

Memo Item

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

Date of Disbursement: MM / DD / YYYY
01 / 24 / 2017

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.1876t
Amount of Each Disbursement this Period: 1938.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1938.72

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BIALEK'S MUSIC

Full Name (Last, First, Middle Initial)

Mailing Address 932 HUNGERFORD DR #3B

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement PAC EVENT ENTERTAINMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.18762

Amount of Each Disbursement this Period: 875.50

Memo Item

B. HERTZ

Full Name (Last, First, Middle Initial)

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement PAC CAR RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.18764

Amount of Each Disbursement this Period: 263.32

Memo Item

C. HILTON

Full Name (Last, First, Middle Initial)

Mailing Address 7930 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.18765

Amount of Each Disbursement this Period: 551.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SHERATON

Mailing Address ONE STARPOINT

City STAMFORD State CT Zip Code 06902

Purpose of Disbursement PAC LODGING

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y
 01 / 24 / 2017

FEC Identification Number

Transaction ID : SB21B.18766
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement PAC SHIPPING

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y
 01 / 24 / 2017

FEC Identification Number

Transaction ID : SB21B.18768
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement SEE MEMO ENTRIES

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y
 01 / 31 / 2017

FEC Identification Number

Transaction ID : SB21B.19052
 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
PAC AIRFARE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 31 / 2017

FEC Identification Number
C
Transaction ID : SB21B.19053
Amount of Each Disbursement this Period
318.40

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 07 / 2017

FEC Identification Number
C
Transaction ID : SB21B.19101
Amount of Each Disbursement this Period
975.63

Memo Item

Full Name (Last, First, Middle Initial)

C. THE LIAISON CAPITOL HILL

Mailing Address 415 NEW JERSEY AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
PAC EVENT FACILITY RENTAL

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 07 / 2017

FEC Identification Number
C
Transaction ID : SB21B.19102
Amount of Each Disbursement this Period
140.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

975.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. 48HOURPRINT.COM		Date of Disbursement MM / DD / YYYY 02 / 07 / 2017
Mailing Address 159 THOMAS E BURGIN PKWY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19104 Amount of Each Disbursement this Period [REDACTED] 769.64
City QUINCY	State MA	Zip Code 02169
Purpose of Disbursement PAC PRINTING		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19423 Amount of Each Disbursement this Period [REDACTED] 1583.76
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. THE LIAISON CAPITOL HILL		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017
Mailing Address 415 NEW JERSEY AVE NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19425 Amount of Each Disbursement this Period [REDACTED] 1503.03
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement PAC EVENT FACILITY RENTAL		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 1583.76
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

Transaction ID : SB21B.19431
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

Transaction ID : SB21B.19434
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. HERTZ

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement
PAC RENTAL CAR

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

Transaction ID : SB21B.19435
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2017

FEC Identification Number

Transaction ID : SB21B.19440
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. HERTZ

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement
PAC RENTAL CAR

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2017

FEC Identification Number

Transaction ID : SB21B.19441
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. EMBASSY SUITES

Mailing Address 7930 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC LODGING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2017

FEC Identification Number

Transaction ID : SB21B.19442
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. 48 HOUR PRINT

Mailing Address 8000 HASKELL AVE

City VAN NUYS State CA Zip Code 91406

Purpose of Disbursement
PAC PRINTING SERVICE

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19443
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
PAC POSTAGE AND ONLINE SERVICE - NO ITEMIZATION

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19704
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
PAC PHONE AND EMAIL - NO ITEMIZATION

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.1997c
 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20104 Amount of Each Disbursement this Period 16.95
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement PAC FAX SERVICE - NO ITEMIZATION		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20174 Amount of Each Disbursement this Period 78.53
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement SEE MEMO ENTRIES		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017
Mailing Address 942 S SHADY GROVE RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20175 Amount of Each Disbursement this Period 78.53
City MEMPHIS	State TN	Zip Code 38119
Purpose of Disbursement PAC SHIPPING		001 Category/ Type
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

95.48

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 04 / 03 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20228 Amount of Each Disbursement this Period [REDACTED] 23.52
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement PAC ONLINE SERVICE - NO ITEMIZATION		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20212 Amount of Each Disbursement this Period [REDACTED] 2888.55
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20211 Amount of Each Disbursement this Period [REDACTED] 855.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement PAC AIRFARE		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 2912.07
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. SOUTHWEST

Mailing Address PO BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement PAC AIRFARE

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.20216
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 SOUTH WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement PAC AIRFARE

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.20217
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAC EVENT FACILITY RENTAL

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.20218
 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 17 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20571
Amount of Each Disbursement this Period
636.92

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
PAC AIRFARE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 17 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20572
Amount of Each Disbursement this Period
541.51

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 17 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20574
Amount of Each Disbursement this Period
19.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

636.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RING CENTRAL

Mailing Address 20 DAVIS DR

City BELMONT State CA Zip Code 94002

Purpose of Disbursement
PAC PHONE SERVICE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.20575
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.20579
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. COURTYARD BY MARRIOTT

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
PAC LODGING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.2058c
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. HILTON

Mailing Address 7930 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC LODGING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
04 / 24 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20581
Amount of Each Disbursement this Period
1206.71

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
SEE MEMO ENTRIES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20630
Amount of Each Disbursement this Period
364.00

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20631
Amount of Each Disbursement this Period
6.65

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

364.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. HILTON

Mailing Address 7930 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC EVENT FACILITY RENTAL

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20634
Amount of Each Disbursement this Period
213.13

Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement
PAC SHIPPING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20636
Amount of Each Disbursement this Period
58.91

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 50TH, 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
PAC POSTAGE - NO ITEMIZATION

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20721
Amount of Each Disbursement this Period
15.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

15.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20790 Amount of Each Disbursement this Period 15.00
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement PAC EMAIL MANAGEMENT - NO ITEMIZATION		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017
Mailing Address 50TH, 200 VESEY ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20835 Amount of Each Disbursement this Period 16.95
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement PAC FAX SERVICE - NO ITEMIZATION		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. BOLD COLORS GROUP LLC		Date of Disbursement MM / DD / YYYY 01 / 25 / 2017
Mailing Address 3133 TIGER RUN CT STE 104		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19051 Amount of Each Disbursement this Period 2500.00
City CARLSBAD	State CA	Zip Code 92010
Purpose of Disbursement PAC FUNDRAISING SERVICES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

2531.95

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. BOLD COLORS GROUP LLC			Date of Disbursement MM / DD / YYYY 02 / 03 / 2017	
Mailing Address 3133 TIGER RUN CT STE 104			FEC Identification Number C [REDACTED]	
City CARLSBAD	State CA	Zip Code 92010	Transaction ID : SB21B.19119	
Purpose of Disbursement PAC FUNDRAISING SERVICES		Category/ Type 001	Amount of Each Disbursement this Period 12751.20	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BOLD COLORS GROUP LLC			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017	
Mailing Address 3133 TIGER RUN CT STE 104			FEC Identification Number C [REDACTED]	
City CARLSBAD	State CA	Zip Code 92010	Transaction ID : SB21B.19966	
Purpose of Disbursement PAC FUNDRAISING SERVICES		Category/ Type 001	Amount of Each Disbursement this Period 5235.94	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BOLD COLORS GROUP LLC			Date of Disbursement MM / DD / YYYY 04 / 04 / 2017	
Mailing Address 3133 TIGER RUN CT STE 104			FEC Identification Number C [REDACTED]	
City CARLSBAD	State CA	Zip Code 92010	Transaction ID : SB21B.20224	
Purpose of Disbursement PAC FUNDRAISING SERVICES		Category/ Type 001	Amount of Each Disbursement this Period 23780.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional)..... ▶

41767.14

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BOLD COLORS GROUP LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3133 TIGER RUN CT
STE 104

City CARLSBAD State CA Zip Code 92010

Purpose of Disbursement PAC FUNDRAISING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.20627

Amount of Each Disbursement this Period: 23827.38

Memo Item

B. CAPITAL ONE

Full Name (Last, First, Middle Initial)

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.19700

Amount of Each Disbursement this Period: 83.66

Memo Item

C. CAPITAL ONE

Full Name (Last, First, Middle Initial)

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.19964

Amount of Each Disbursement this Period: 118.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 24029.70

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20172
Amount of Each Disbursement this Period
28.49

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 24 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20207
Amount of Each Disbursement this Period
77.17

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20221
Amount of Each Disbursement this Period
95.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

201.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20644
Amount of Each Disbursement this Period
84.41

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20639
Amount of Each Disbursement this Period
34.67

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAC BANK FEES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20788
Amount of Each Disbursement this Period
71.51

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

190.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. CAPITAL ONE

Mailing Address 1680 CAPITAL ONE TOWER DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC BANK FEES

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2017

FEC Identification Number
C
Transaction ID : SB21B.20834
Amount of Each Disbursement this Period
40.09

Memo Item

Full Name (Last, First, Middle Initial)

B. DOWNS, KELSEY, , ,

Mailing Address 1360 PEBBLE COURT #305

City CINCINNATI State OH Zip Code 45255

Purpose of Disbursement PAC GRAPHIC DESIGN

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 23 / 2017

FEC Identification Number
C
Transaction ID : SB21B.19049
Amount of Each Disbursement this Period
1340.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTEK USA

Mailing Address PO BOX 23715

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement PAC SOFTWARE

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number
C
Transaction ID : SB21B.18754
Amount of Each Disbursement this Period
500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1880.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ELECTEK USA

Mailing Address PO BOX 23715

City
CHAGRIN FALLS

State
OH

Zip Code
44023

Purpose of Disbursement
PAC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.19120
Amount of Each Disbursement this Period
[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTEK USA

Mailing Address PO BOX 23715

City
CHAGRIN FALLS

State
OH

Zip Code
44023

Purpose of Disbursement
PAC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.19968
Amount of Each Disbursement this Period
[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTEK USA

Mailing Address PO BOX 23715

City
CHAGRIN FALLS

State
OH

Zip Code
44023

Purpose of Disbursement
PAC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.2022t
Amount of Each Disbursement this Period
[] 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

[]	1500.00
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TOTAL This Period (last page this line number only).....▶

[]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ELECTEK USA

Mailing Address PO BOX 23715

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement PAC SOFTWARE

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.20643
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ILER, MEREDITH, , ,

Mailing Address 11410 CARSON FIELD LANE

City CYPRESS State TX Zip Code 77433

Purpose of Disbursement IN-KIND: FOOD FOR EVENT

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.21027
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELL, TANDY, , ,

Mailing Address 12400 COIT RD
STE 800

City DALLAS State TX Zip Code 75251

Purpose of Disbursement PAC IN-KIND: FOOD, WINE AND SERVER

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

Transaction ID : SB21B.20717
 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 20 / 2017

FEC Identification Number

Transaction ID : SB21B.19047
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 21 / 2017

FEC Identification Number

Transaction ID : SB21B.19436
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2017

FEC Identification Number

Transaction ID : SB21B.20173
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
04 / 25 / 2017

FEC Identification Number

Transaction ID : SB21B.20846
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S. MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 19 / 2017

FEC Identification Number

Transaction ID : SB21B.20817
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
01 / 30 / 2017

FEC Identification Number

Transaction ID : SB21B.19097
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2017

FEC Identification Number

Transaction ID : SB21B.19703
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

Transaction ID : SB21B.20102
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

Transaction ID : SB21B.20227
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20620
Amount of Each Disbursement this Period
677.49

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20626
Amount of Each Disbursement this Period
110.10

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20642
Amount of Each Disbursement this Period
32.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

819.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20792
Amount of Each Disbursement this Period
1107.94

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20822
Amount of Each Disbursement this Period
15.84

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20823
Amount of Each Disbursement this Period
1.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1124.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 22 / 2017

FEC Identification Number

Transaction ID : SB21B.20825
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2017

FEC Identification Number

Transaction ID : SB21B.20840
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 24 / 2017

FEC Identification Number

Transaction ID : SB21B.20841
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20842
Amount of Each Disbursement this Period
2.20

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20843
Amount of Each Disbursement this Period
3.20

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST.

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20855
Amount of Each Disbursement this Period
0.39

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 03 / 20 / 2017	
Mailing Address PO BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20171 Amount of Each Disbursement this Period [REDACTED] 73.50	
City ATLANTA	State GA	Zip Code 30302	Category/Type 001
Purpose of Disbursement PAC BANK FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017	
Mailing Address PO BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20618 Amount of Each Disbursement this Period [REDACTED] 145.50	
City ATLANTA	State GA	Zip Code 30302	Category/Type 001
Purpose of Disbursement PAC BANK FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017	
Mailing Address PO BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.20811 Amount of Each Disbursement this Period [REDACTED] 73.50	
City ATLANTA	State GA	Zip Code 30302	Category/Type 001
Purpose of Disbursement PAC BANK FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 292.50
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.19437

Amount of Each Disbursement this Period

[REDACTED]	157.19
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.19420

Amount of Each Disbursement this Period

[REDACTED]	494.78
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20103

Amount of Each Disbursement this Period

[REDACTED]	576.07
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Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED]	1228.04
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[REDACTED]	
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20225

Amount of Each Disbursement this Period

[REDACTED] 169.44

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20622

Amount of Each Disbursement this Period

[REDACTED] 21.18

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20623

Amount of Each Disbursement this Period

[REDACTED] 21.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 211.80

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20624
Amount of Each Disbursement this Period
254.16

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20645
Amount of Each Disbursement this Period
21.18

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB21B.20646
Amount of Each Disbursement this Period
42.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

317.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 03 / 2017

FEC Identification Number

Transaction ID : SB21B.20647
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 04 / 2017

FEC Identification Number

Transaction ID : SB21B.20648
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 05 / 2017

FEC Identification Number

Transaction ID : SB21B.20649
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

Transaction ID : SB21B.20650
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2017

FEC Identification Number

Transaction ID : SB21B.20791
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 16 / 2017

FEC Identification Number

Transaction ID : SB21B.20844
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20820

Amount of Each Disbursement this Period

[REDACTED] 21.18

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20821

Amount of Each Disbursement this Period

[REDACTED] 42.36

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTON

State
DC

Zip Code
20260

Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.20837

Amount of Each Disbursement this Period

[REDACTED] 42.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 105.90

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.20838
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.20839
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.2085t
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ZEALOUS, LLC

Mailing Address 730 MUSTANG ST
#10

City
FREDERICKSBURG

State
TX

Zip Code
78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.18752

Amount of Each Disbursement this Period

2	5	1	7	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. ZEALOUS, LLC

Mailing Address 730 MUSTANG ST
#10

City
FREDERICKSBURG

State
TX

Zip Code
78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.19118

Amount of Each Disbursement this Period

4	1	0	8	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. ZEALOUS, LLC

Mailing Address 730 MUSTANG ST
#10

City
FREDERICKSBURG

State
TX

Zip Code
78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.19965

Amount of Each Disbursement this Period

4	2	8	0	5	0
---	---	---	---	---	---

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	0	9	0	5	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ZEALOUS, LLC

Mailing Address 730 MUSTANG ST
#10

City FREDERICKSBURG State TX Zip Code 78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.20223
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ZEALOUS, LLC

Mailing Address 730 MUSTANG ST
#10

City FREDERICKSBURG State TX Zip Code 78624

Purpose of Disbursement
PAC DIGITAL CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.20628
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. ALEX MOONEY FOR CONGRESS

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
MOONEY, ALEXANDER, XAVIER, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WV District: 02

Date of Disbursement

M M / D D / Y Y Y Y
02 / 08 / 2017

FEC Identification Number

C C00629949

Transaction ID : SB23.19130

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ALEX MOONEY FOR CONGRESS

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
MOONEY, ALEXANDER, XAVIER, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WV District: 02

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00629949

Transaction ID : SB23.20265

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ALEX MOONEY FOR CONGRESS

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name
MOONEY, ALEXANDER, XAVIER, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WV District: 02

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00629949

Transaction ID : SB23.20266

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

13100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. ALEX MOONEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 1863		FEC Identification Number C00629949 Transaction ID : SB23.20267
City MARTINSBURG	State WV	Zip Code 25402
Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283		Category/Type 001
Candidate Name MOONEY, ALEXANDER, XAVIER, ,		Amount of Each Disbursement this Period 5400.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: WV	District: 02	

Full Name (Last, First, Middle Initial) B. ALEX MOONEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 1863		FEC Identification Number C00629949 Transaction ID : SB23.20287
City MARTINSBURG	State WV	Zip Code 25402
Purpose of Disbursement CONTRIBUTION		Category/Type 001
Candidate Name MOONEY, ALEXANDER, XAVIER, ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WV	District: 02	

Full Name (Last, First, Middle Initial) C. ALEX MOONEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address PO BOX 1863		FEC Identification Number C00629949 Transaction ID : SB23.20531
City MARTINSBURG	State WV	Zip Code 25402
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Category/Type 001
Candidate Name MOONEY, ALEXANDER, XAVIER, ,		Amount of Each Disbursement this Period 5400.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WV	District: 02	

SUBTOTAL of Disbursements This Page (optional).....▶	10400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. ALEX MOONEY FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

Mailing Address PO BOX 1863

FEC Identification Number

C C00629949

Transaction ID : SB23.20532

Amount of Each Disbursement this Period

5400.00

Memo Item

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
MOONEY, ALEXANDER, XAVIER, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: WV District: 02

Full Name (Last, First, Middle Initial)
B. BIGGS FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	1	7

Mailing Address 228 S WASHINGTON ST
STE 115

FEC Identification Number

C C00610451

Transaction ID : SB23.19127

Amount of Each Disbursement this Period

5000.00

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
BIGGS, ANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Full Name (Last, First, Middle Initial)
C. BIGGS FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

Mailing Address 228 S WASHINGTON ST
STE 115

FEC Identification Number

C C00610451

Transaction ID : SB23.20269

Amount of Each Disbursement this Period

5000.00

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
BIGGS, ANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

SUBTOTAL of Disbursements This Page (optional).....▶

10000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement TRANSMITTAL OF EARMARKS

Candidate Name **BIGGS, ANDY, , ,**

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00610451
Transaction ID : SB23.20293
Amount of Each Disbursement this Period: 8100.00

Memo Item

B. BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267

Candidate Name **BIGGS, ANDY, , ,**

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00610451
Transaction ID : SB23.20294
Amount of Each Disbursement this Period: 2700.00

Memo Item

C. BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283

Candidate Name **BIGGS, ANDY, , ,**

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00610451
Transaction ID : SB23.20295
Amount of Each Disbursement this Period: 5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8100.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement TRANSMITTAL OF EARMARKS

Candidate Name
BIGGS, ANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00610451
Transaction ID : SB23.20533
Amount of Each Disbursement this Period: 5400.00

Memo Item

B. BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296

Candidate Name
BIGGS, ANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 05

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00610451
Transaction ID : SB23.20534
Amount of Each Disbursement this Period: 5400.00

Memo Item

C. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement CONTRIBUTION

Candidate Name
BLUM, RODNEY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C00543926
Transaction ID : SB23.19128
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

10400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00543926

Transaction ID : SB23.20431

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00543926

Transaction ID : SB23.20432

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Category/
Type

Candidate Name

BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00543926

Transaction ID : SB23.20433

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C00543926 Transaction ID : SB23.20280 Amount of Each Disbursement this Period 5000.00
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement CONTRIBUTION		001 Category/ Type
Candidate Name BLUM, RODNEY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	

Full Name (Last, First, Middle Initial) B. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C00543926 Transaction ID : SB23.20557 Amount of Each Disbursement this Period 5400.00
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement TRANSMITTAL OF EARMARKS		001 Category/ Type
Candidate Name BLUM, RODNEY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 01	

Full Name (Last, First, Middle Initial) C. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C00543926 Transaction ID : SB23.20558 Amount of Each Disbursement this Period 5400.00
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296		001 Category/ Type
Candidate Name BLUM, RODNEY, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	

SUBTOTAL of Disbursements This Page (optional).....▶

10400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. CONNELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 572 JOHN ROSS PKWY
STE 107-203

City ROCK HILL State SC Zip Code 29730

Purpose of Disbursement
CONTRIBUTUION

001
Category/
Type

Candidate Name
CONNELLY, CHAD, , ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2017

FEC Identification Number

C C00632851

Transaction ID : SB23.20619

Amount of Each Disbursement this Period

5000.00

Memo Item

B. DAVIDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD State OH Zip Code 45014

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
DAVIDSON, WARREN, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: OH District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2017

FEC Identification Number

C C00600718

Transaction ID : SB23.20169

Amount of Each Disbursement this Period

2700.00

Memo Item

C. DAVIDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD State OH Zip Code 45014

Purpose of Disbursement
EARMARKED BY CHRISTOPHER MEYER ID# 4611

001
Category/
Type

Candidate Name
DAVIDSON, WARREN, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2017

FEC Identification Number

C C00600718

Transaction ID : SB23.20170

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7700.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.20473 Amount of Each Disbursement this Period 8100.00
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement TRANSMITTAL OF EARMARKS		001 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) B. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.20474 Amount of Each Disbursement this Period 2700.00
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267		001 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) C. DAVIDSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 3235 HOMEWARD WAY		FEC Identification Number C C00600718 Transaction ID : SB23.20475 Amount of Each Disbursement this Period 5400.00
City FAIRFIELD	State OH	Zip Code 45014
Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283		001 Category/ Type
Candidate Name DAVIDSON, WARREN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: OH	District: 08	

SUBTOTAL of Disbursements This Page (optional)..... ▶

8100.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. DAVIDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
DAVIDSON FOR CONGRESS

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD State OH Zip Code 45014

Purpose of Disbursement CONTRIBUTION

Candidate Name DAVIDSON, WARREN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 08

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00600718
Transaction ID : SB23.20282
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. DAVIDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
DAVIDSON FOR CONGRESS

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD State OH Zip Code 45014

Purpose of Disbursement TRANSMITTAL OF EARMARKS

Candidate Name DAVIDSON, WARREN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 08

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00600718
Transaction ID : SB23.20569
Amount of Each Disbursement this Period: 5400.00

Memo Item

C. DAVIDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
DAVIDSON FOR CONGRESS

Mailing Address 3235 HOMEWARD WAY

City FAIRFIELD State OH Zip Code 45014

Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296

Candidate Name DAVIDSON, WARREN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 08

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00600718
Transaction ID : SB23.20570
Amount of Each Disbursement this Period: 5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. FRIENDS OF BILL POSEY

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

Candidate Name
POSEY, BILL, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 08

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00444968
Transaction ID : SB23.20299
Amount of Each Disbursement this Period: 8100.00

Memo Item

B. FRIENDS OF BILL POSEY

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

Candidate Name
POSEY, BILL, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 08

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00444968
Transaction ID : SB23.20300
Amount of Each Disbursement this Period: 2700.00

Memo Item

C. FRIENDS OF BILL POSEY

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

Candidate Name
POSEY, BILL, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 08

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C00444968
Transaction ID : SB23.20301
Amount of Each Disbursement this Period: 5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8100.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BILL POSEY

Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
POSEY, BILL, , ,

Office Sought: House
 Senate
 President
State: FL District: 08

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00444968

Transaction ID : SB23.20277

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BILL POSEY

Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
POSEY, BILL, , ,

Office Sought: House
 Senate
 President
State: FL District: 08

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C C00444968

Transaction ID : SB23.20535

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF BILL POSEY

Mailing Address P. O. BOX 411486

City MELBOURNE State FL Zip Code 32941

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
POSEY, BILL, , ,

Office Sought: House
 Senate
 President
State: FL District: 08

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C C00444968

Transaction ID : SB23.20536

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

10400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2017

FEC Identification Number

C00554949

Transaction ID : SB23.19091

Amount of Each Disbursement this Period

10800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2017

FEC Identification Number

C00554949

Transaction ID : SB23.19092

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVE BRAT INC.

Mailing Address PO BOX 5094

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement
EARMARKED BY JACQUELINE KATZ ID# 7681

001
Category/
Type

Candidate Name
BRAT, DAVID, ALAN, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2017

FEC Identification Number

C00554949

Transaction ID : SB23.19093

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10800.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. FRIENDS OF DAVE BRAT INC.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 5094		FEC Identification Number C00554949 Transaction ID : SB23.20270 Amount of Each Disbursement this Period 5000.00
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement CONTRIBUTION		001 Category/ Type
Candidate Name BRAT, DAVID, ALAN, ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 07	

Full Name (Last, First, Middle Initial) B. FRIENDS OF DAVE BRAT INC.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 5094		FEC Identification Number C00554949 Transaction ID : SB23.20304 Amount of Each Disbursement this Period 2700.00
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement TRANSMITTAL OF EARMARKS		001 Category/ Type
Candidate Name BRAT, DAVID, ALAN, ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 07	

Full Name (Last, First, Middle Initial) C. FRIENDS OF DAVE BRAT INC.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 5094		FEC Identification Number C00554949 Transaction ID : SB23.20305 Amount of Each Disbursement this Period 2700.00
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267		001 Category/ Type
Candidate Name BRAT, DAVID, ALAN, ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 07	

SUBTOTAL of Disbursements This Page (optional)..... ▶

7700.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO BOX 90133

City NASHVILLE State TN Zip Code 37209

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
DESJARLAIS, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District: 04

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00464073
Transaction ID : **SB23.20443**
Amount of Each Disbursement this Period
8100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO BOX 90133

City NASHVILLE State TN Zip Code 37209

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name
DESJARLAIS, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District: 04

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00464073
Transaction ID : **SB23.20444**
Amount of Each Disbursement this Period
2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO BOX 90133

City NASHVILLE State TN Zip Code 37209

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
DESJARLAIS, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District: 04

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00464073
Transaction ID : **SB23.20445**
Amount of Each Disbursement this Period
5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. JODY HICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 586

City MONROE State GA Zip Code 30655

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
HICE, JODY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: GA District: 10

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C00544445
Transaction ID : **SB23.20373**
Amount of Each Disbursement this Period
5400.00

Memo Item

B. JODY HICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 586

City MONROE State GA Zip Code 30655

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
HICE, JODY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: GA District: 10

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00544445
Transaction ID : **SB23.20537**
Amount of Each Disbursement this Period
5400.00

Memo Item

C. JODY HICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 586

City MONROE State GA Zip Code 30655

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
HICE, JODY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: GA District: 10

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00544445
Transaction ID : **SB23.20538**
Amount of Each Disbursement this Period
5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

C C00476291

Transaction ID : SB23.20279

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

C C00476291

Transaction ID : SB23.20377

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

C C00476291

Transaction ID : SB23.20378

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20379

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20539

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

Category/
Type

Candidate Name
AMASH, JUSTIN, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20540

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2017

Mailing Address PO BOX 8060

FEC Identification Number

C C00386532

Transaction ID : SB23.20383

Amount of Each Disbursement this Period

8100.00

Memo Item

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 01

Full Name (Last, First, Middle Initial)

B. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2017

Mailing Address PO BOX 8060

FEC Identification Number

C C00386532

Transaction ID : SB23.20384

Amount of Each Disbursement this Period

2700.00

Memo Item

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 01

Full Name (Last, First, Middle Initial)

C. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2017

Mailing Address PO BOX 8060

FEC Identification Number

C C00386532

Transaction ID : SB23.20385

Amount of Each Disbursement this Period

5400.00

Memo Item

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 01

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 8060

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 01

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00386532

Transaction ID : SB23.20284

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 8060

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: TX District: 01

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00386532

Transaction ID : SB23.20541

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOUIE GOHMERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 8060

City
TYLER

State
TX

Zip Code
75711

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001

Category/
Type

Candidate Name

GOHMERT, LOUIS, B. MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 01

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00386532

Transaction ID : SB23.20542

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NC District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00503094

Transaction ID : SB23.20389

Amount of Each Disbursement this Period

5200.00

Memo Item

B. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
EARMARKED BY MIKE AIN ID# 8524

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NC District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00503094

Transaction ID : SB23.20477

Amount of Each Disbursement this Period

2500.00

Memo Item

C. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NC District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00503094

Transaction ID : SB23.20478

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5200.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00503094

Transaction ID : SB23.20275

Amount of Each Disbursement this Period

5000.00

Memo Item

B. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NC District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C C00503094

Transaction ID : SB23.20543

Amount of Each Disbursement this Period

5400.00

Memo Item

C. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 811

City
HENDERSONVILLE

State
NC

Zip Code
28793

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001

Category/
Type

Candidate Name

MEADOWS, MARK, R., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C C00503094

Transaction ID : SB23.20544

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MEADOWS FOR CONGRESS

Mailing Address PO BOX 811

City HENDERSONVILLE State NC Zip Code 28793

Purpose of Disbursement TRANSMITTAL OF EARMARKS

Candidate Name MEADOWS, MARK, R., ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NC District: 11

Date of Disbursement: 05 / 16 / 2017

FEC Identification Number: C00503094
Transaction ID : SB23.20769

Amount of Each Disbursement this Period: 2700.00

Memo Item

B. MEADOWS FOR CONGRESS

Full Name (Last, First, Middle Initial)
MEADOWS FOR CONGRESS

Mailing Address PO BOX 811

City HENDERSONVILLE State NC Zip Code 28793

Purpose of Disbursement EARMARKED BY BRETT HENDRICKSON ID# 7454

Candidate Name MEADOWS, MARK, R., ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NC District: 11

Date of Disbursement: 05 / 09 / 2017

FEC Identification Number: C00503094
Transaction ID : SB23.20770

Amount of Each Disbursement this Period: 2700.00

Memo Item

C. MIKE JOHNSON FOR LOUISIANA

Full Name (Last, First, Middle Initial)
MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement TRANSMITTAL OF EARMARKS

Candidate Name JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C00608695
Transaction ID : SB23.19038

Amount of Each Disbursement this Period: 5200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7900.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	7

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY COMMUNITY BANCSHARES OF MISSISSIPPI INC.
POLITICAL ACTION COMMITTEE ID# 7224

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.19039

Amount of Each Disbursement this Period

1000.00

Memo Item

Office Sought: House Senate President
Disbursement For: 2018 Primary General
 Other (specify) ▼
State: LA District: 04

Full Name (Last, First, Middle Initial)

B. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	7

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY LEE BEARMAN ID# 9632

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.19040

Amount of Each Disbursement this Period

1000.00

Memo Item

Office Sought: House Senate President
Disbursement For: 2018 Primary General
 Other (specify) ▼
State: LA District: 04

Full Name (Last, First, Middle Initial)

C. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	7

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY ROBERT LUDDY ID# 4233

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.19041

Amount of Each Disbursement this Period

2700.00

Memo Item

Office Sought: House Senate President
Disbursement For: 2018 Primary General
 Other (specify) ▼
State: LA District: 04

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		19		2017

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY SARAH RINDLAUB ID# 4374

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.19042

Amount of Each Disbursement this Period

500.00

Memo Item

Candidate Name

JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Full Name (Last, First, Middle Initial)

B. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2017

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
CONTRIBUTION

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.19129

Amount of Each Disbursement this Period

5000.00

Memo Item

Candidate Name

JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Full Name (Last, First, Middle Initial)

C. MIKE JOHNSON FOR LOUISIANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2017

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
CONTRIBUTION

001
Category/ Type

FEC Identification Number

C	C00608695
---	-----------

Transaction ID : SB23.20274

Amount of Each Disbursement this Period

5000.00

Memo Item

Candidate Name

JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20401

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name
JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: LA District: 04

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20402

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.20403

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District: 04

Date of Disbursement

/ /

FEC Identification Number

C C00608695

Transaction ID : SB23.20547

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MIKE JOHNSON FOR LOUISIANA

Mailing Address 2900 CLEARVIEW PKWY
SUITE 206

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
JOHNSON, JAMES, MICHAEL, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: LA District: 04

Date of Disbursement

/ /

FEC Identification Number

C C00608695

Transaction ID : SB23.20548

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MOBROOKSFORCONGRESS.COM

Mailing Address 7610 FOXFIRE DR.

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
BROOKS, MO, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AL District: 05

Date of Disbursement

/ /

FEC Identification Number

C C00464149

Transaction ID : SB23.20407

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. MOBROOKSFORCONGRESS.COM		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 7610 FOXFIRE DR.		FEC Identification Number C00464149 Transaction ID : SB23.20408
City HUNTSVILLE	State AL	Zip Code 35802
Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267		Amount of Each Disbursement this Period 2700.00
Candidate Name BROOKS, MO, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL	District: 05	

Full Name (Last, First, Middle Initial) B. MOBROOKSFORCONGRESS.COM		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 7610 FOXFIRE DR.		FEC Identification Number C00464149 Transaction ID : SB23.20409
City HUNTSVILLE	State AL	Zip Code 35802
Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283		Amount of Each Disbursement this Period 5400.00
Candidate Name BROOKS, MO, , ,		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL	District: 05	

Full Name (Last, First, Middle Initial) C. MOBROOKSFORCONGRESS.COM		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 7610 FOXFIRE DR.		FEC Identification Number C00464149 Transaction ID : SB23.20281
City HUNTSVILLE	State AL	Zip Code 35802
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name BROOKS, MO, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL	District: 05	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. MOBROOKSFORCONGRESS.COM

Mailing Address 7610 FOXFIRE DR.

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
BROOKS, MO, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: AL District: 05

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00464149
Transaction ID : SB23.20549
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MOBROOKSFORCONGRESS.COM

Mailing Address 7610 FOXFIRE DR.

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
BROOKS, MO, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: AL District: 05

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00464149
Transaction ID : SB23.20550
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PATRIOTS FOR PERRY

Mailing Address PO BOX 147

City RED LION State PA Zip Code 17356

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
PERRY, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: PA District: 04

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00510164
Transaction ID : SB23.20449
Amount of Each Disbursement this Period
8100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

13500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. PATRIOTS FOR PERRY		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 147		FEC Identification Number C C00510164 Transaction ID : SB23.20450 Amount of Each Disbursement this Period 2700.00
City RED LION	State PA	
Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267		Category/ Type 001
Candidate Name PERRY, SCOTT, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: PA	District: 04	

Full Name (Last, First, Middle Initial) B. PATRIOTS FOR PERRY		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 147		FEC Identification Number C C00510164 Transaction ID : SB23.20451 Amount of Each Disbursement this Period 5400.00
City RED LION	State PA	
Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283		Category/ Type 001
Candidate Name PERRY, SCOTT, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: PA	District: 04	

Full Name (Last, First, Middle Initial) C. PATRIOTS FOR PERRY		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 147		FEC Identification Number C C00510164 Transaction ID : SB23.20288 Amount of Each Disbursement this Period 5000.00
City RED LION	State PA	
Purpose of Disbursement CONTRIBUTION		Category/ Type 001
Candidate Name PERRY, SCOTT, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 04	

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. PATRIOTS FOR PERRY		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address PO BOX 147		FEC Identification Number C 000510164 Transaction ID : SB23.20561 Amount of Each Disbursement this Period 5400.00
City RED LION	State PA	
Zip Code 17356	Purpose of Disbursement TRANSMITTAL OF EARMARKS	Memo Item <input type="checkbox"/>
Candidate Name PERRY, SCOTT, , ,	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 04	

Full Name (Last, First, Middle Initial) B. PATRIOTS FOR PERRY		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address PO BOX 147		FEC Identification Number C 000510164 Transaction ID : SB23.20562 Amount of Each Disbursement this Period 5400.00
City RED LION	State PA	
Zip Code 17356	Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296	Memo Item <input checked="" type="checkbox"/>
Candidate Name PERRY, SCOTT, , ,	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 04	

Full Name (Last, First, Middle Initial) C. PAUL GOSAR FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address PO BOX 2967		FEC Identification Number C 000461806 Transaction ID : SB23.19131 Amount of Each Disbursement this Period 5000.00
City PRESCOTT	State AZ	
Zip Code 86302	Purpose of Disbursement CONTRIBUTION	Memo Item <input type="checkbox"/>
Candidate Name GOSAR, PAUL, ANTHONY, ,	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 04	

SUBTOTAL of Disbursements This Page (optional).....▶

10400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00461806

Transaction ID : SB23.20273

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00461806

Transaction ID : SB23.20413

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00461806

Transaction ID : SB23.20414

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

13100.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C C00461806

Transaction ID : SB23.20415

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

C C00461806

Transaction ID : SB23.20551

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City
PRESCOTT

State
AZ

Zip Code
86302

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001

Category/
Type

Candidate Name

GOSAR, PAUL, ANTHONY, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

C C00461806

Transaction ID : SB23.20552

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City
HOBBS

State
NM

Zip Code
88241

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

PEARCE, STEVAN, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 02

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00463836

Transaction ID : SB23.20276

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City
HOBBS

State
NM

Zip Code
88241

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

PEARCE, STEVAN, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 02

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00463836

Transaction ID : SB23.20455

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City
HOBBS

State
NM

Zip Code
88241

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

PEARCE, STEVAN, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 02

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C C00463836

Transaction ID : SB23.20456

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

13100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City HOBBS State NM Zip Code 88241

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
PEARCE, STEVAN, E., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NM District: 02

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C00463836
Transaction ID : SB23.20457
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City HOBBS State NM Zip Code 88241

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
PEARCE, STEVAN, E., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NM District: 02

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00463836
Transaction ID : SB23.20563
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR PEARCE

Mailing Address PO BOX 2696

City HOBBS State NM Zip Code 88241

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
PEARCE, STEVAN, E., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NM District: 02

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00463836
Transaction ID : SB23.20564
Amount of Each Disbursement this Period
5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

NORMAN, RALPH, W MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: SC District: 05

SPECIAL PRIMARY

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20771

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

NORMAN, RALPH, W MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: SC District: 05

SPECIAL PRIMARY

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 16 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20772

Amount of Each Disbursement this Period

26800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY LEE BEAMAN ID# 9632

001

Category/
Type

Candidate Name

NORMAN, RALPH, W MR. JR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: SC District: 05

SPECIAL PRIMARY

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20773

Amount of Each Disbursement this Period

2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

31800.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY BARBARA GABY ID# 4294

001

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20774

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY RICHARD GABY ID# 4292

001

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20775

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY SUZANNE HUDGENS ID# 7226

001

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20776

Amount of Each Disbursement this Period

300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20777

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JAMES KIRK ID# 7015

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20778

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY WENDY KOLOKOTRONES ID# 8571

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20779

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
EARMARKED BY ANDREW MILLER ID# 10290

001
Category/ Type

C C00416461

Transaction ID : SB23.20780

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

1000.00

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
EARMARKED BY ROBERT NAEGELE ID# 10291

001
Category/ Type

C C00416461

Transaction ID : SB23.20781

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

500.00

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
EARMARKED BY RICHARD NORD ID# 4585

001
Category/ Type

C C00416461

Transaction ID : SB23.20782

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

1000.00

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY KAREN WRIGHT ID# 7410

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement: 05 / 11 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20783
Amount of Each Disbursement this Period: 2700.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY LAURA ZULUETA ID# 5149

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement: 05 / 11 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20784
Amount of Each Disbursement this Period: 2700.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JOHN CHILDS ID# 6539

Candidate Name
NORMAN, RALPH, W MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL PRIMARY**

State: SC District: 05

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20785
Amount of Each Disbursement this Period: 2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		12		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
EARMARKED BY MICHAEL RYDIN ID# 5158

001
Category/ Type

C C00416461

Transaction ID : SB23.20786

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

2000.00

Office Sought: House Senate President

Disbursement For: 2017

Primary General

Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		12		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
EARMARKED BY MARLENE CHILDS ID# 6540

001
Category/ Type

C C00416461

Transaction ID : SB23.20787

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

2700.00

Office Sought: House Senate President

Disbursement For: 2017

Primary General

Other (specify) ▼
SPECIAL PRIMARY

State: SC District: 05

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 36518

M M M	/	D D D	/	Y Y Y Y Y
05		22		2017

City
ROCK HILL

State
SC

Zip Code
29732

FEC Identification Number

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/ Type

C C00416461

Transaction ID : SB23.20826

Amount of Each Disbursement this Period

Candidate Name
NORMAN, RALPH, W MR. JR, ,

3425.00

Office Sought: House Senate President

Disbursement For: 2017

Primary General

Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

3425.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JOHN SCOTT ID# 6163

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20827

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY ROBERT LUDDY ID# 4233

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 17 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20832

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY WILLIAM MORGAN ID# 8527

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 18 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20828

Amount of Each Disbursement this Period

250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY SHARON MCCREIGHT ID# 5206

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20829
Amount of Each Disbursement this Period: 25.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY BILL BRISTOR ID# 9448

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20830
Amount of Each Disbursement this Period: 100.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY STEVE WELKER ID# 4524

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20831
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017
Mailing Address P O BOX 36518		FEC Identification Number C C00416461 Transaction ID : SB23.20818 Amount of Each Disbursement this Period 5000.00
City ROCK HILL	State SC	Zip Code 29732
Purpose of Disbursement CONTRIBUTION		Category/ Type 001
Candidate Name NORMAN, RALPH, W MR. JR, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL RUNOFF	
State: SC	District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017
Mailing Address P O BOX 36518		FEC Identification Number C C00416461 Transaction ID : SB23.20819 Amount of Each Disbursement this Period 5000.00
City ROCK HILL	State SC	Zip Code 29732
Purpose of Disbursement CONTRIBUTION		Category/ Type 001
Candidate Name NORMAN, RALPH, W MR. JR, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
State: SC	District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017
Mailing Address P O BOX 36518		FEC Identification Number C C00416461 Transaction ID : SB23.20836 Amount of Each Disbursement this Period 100.00
City ROCK HILL	State SC	Zip Code 29732
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Category/ Type 001
Candidate Name NORMAN, RALPH, W MR. JR, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL	
State: SC	District: 05	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY FRED KAPETANSKY ID# 6757

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2017

FEC Identification Number

C C00416461

Transaction ID : **SB23.20856**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : **SB23.20857**

Amount of Each Disbursement this Period

5541.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY EMMANUEL ZULUETA ID# 6220

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : **SB23.20995**

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5541.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JOSEPH KOZUH ID# 7482

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20954

Amount of Each Disbursement this Period: 50.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY HARRY SNYDER ID# 8421

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20955

Amount of Each Disbursement this Period: 5.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JIM HALL ID# 4579

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20956

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement EARMARKED BY PRAMOD BHOOMA ID# 10149

Candidate Name **NORMAN, RALPH, W MR. JR, ,**

Office Sought: House Senate President
 Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20957
 Amount of Each Disbursement this Period: 10.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement EARMARKED BY BRUCE SCOTT ID# 9904

Candidate Name **NORMAN, RALPH, W MR. JR, ,**

Office Sought: House Senate President
 Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20958
 Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement EARMARKED BY GERRY HANSEN ID# 8177

Candidate Name **NORMAN, RALPH, W MR. JR, ,**

Office Sought: House Senate President
 Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20959
 Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address P O BOX 36518			
City ROCK HILL	State SC	Zip Code 29732	
Purpose of Disbursement EARMARKED BY ELAINE PORTIER ID# 6563		Category/Type 001	FEC Identification Number C C00416461 Transaction ID : SB23.20960 Amount of Each Disbursement this Period 50.00
Candidate Name NORMAN, RALPH, W MR. JR, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL		
State: SC District: 05	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address P O BOX 36518			
City ROCK HILL	State SC	Zip Code 29732	
Purpose of Disbursement EARMARKED BY JOAN PASSAMANTE ID# 10208		Category/Type 001	FEC Identification Number C C00416461 Transaction ID : SB23.20961 Amount of Each Disbursement this Period 10.00
Candidate Name NORMAN, RALPH, W MR. JR, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL		
State: SC District: 05	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. RALPH NORMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address P O BOX 36518			
City ROCK HILL	State SC	Zip Code 29732	
Purpose of Disbursement EARMARKED BY GARY BURKLE ID# 6538		Category/Type 001	FEC Identification Number C C00416461 Transaction ID : SB23.20962 Amount of Each Disbursement this Period 4.00
Candidate Name NORMAN, RALPH, W MR. JR, ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL GENERAL		
State: SC District: 05	<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY SHARON MCCREIGHT ID# 5206

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL
State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20963

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY STEVEN COWLES ID# 7450

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL
State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20964

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CHRISTOPHER MEYER ID# 4611

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL
State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20965

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY ROBERT TRENTO ID# 10210

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20966

Amount of Each Disbursement this Period: 50.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CLAY WERTS ID# 7419

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20967

Amount of Each Disbursement this Period: 50.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CHERYL KIELLEY ID# 7481

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20968

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JOHN RHOAD ID# 5344

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20969

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY SARAH RINDLAUB ID# 4374

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20970

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY KAREN SMIGA ID# 7146

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20971

Amount of Each Disbursement this Period

10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JUDITH KEINER ID# 5363

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20972
Amount of Each Disbursement this Period: 10.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JUDY PETTIT ID# 5160

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20973
Amount of Each Disbursement this Period: 100.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY TIMOTHY DOCTER ID# 8600

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20974
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY MARILYN HINTON ID# 4459

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20975
Amount of Each Disbursement this Period: 25.00

Memo Item

B. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY RICHARD REX ID# 6980

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20976
Amount of Each Disbursement this Period: 50.00

Memo Item

C. RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY STEVE WELKER ID# 4524

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00416461
Transaction ID : SB23.20977
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY RICHARD ELDRIDGE ID# 7473

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C000416461

Transaction ID : SB23.20978

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY VERN HARMAN ID# 8637

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C000416461

Transaction ID : SB23.20979

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY DAVID LINEHAN ID# 10298

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C000416461

Transaction ID : SB23.20980

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY BARRY SCHLECH ID# 10213

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20981

Amount of Each Disbursement this Period

112.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JERRY WOODWARD ID# 8010

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20982

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY PETER HANSEN ID# 6176

001
Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20983

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY PAULINE ZAZULAK ID# 4492

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	0		2	0	1	7		

FEC Identification Number

C000416461

Transaction ID : SB23.20984

Amount of Each Disbursement this Period

2	5	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY PATRICIA FEAGLES ID# 6823

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	0		2	0	1	7		

FEC Identification Number

C000416461

Transaction ID : SB23.20985

Amount of Each Disbursement this Period

1	5	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY D.H. BAREHAM ID# 6185

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	7		

FEC Identification Number

C000416461

Transaction ID : SB23.20992

Amount of Each Disbursement this Period

2	5	.	0	0
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Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0	0	.	0	0
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0	0	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY PHILLIP CORELLI ID# 5371

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20993

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY NAOMI PEREZ ID# 6570

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20994

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CHRIS SHAGNEA ID# 4530

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20986

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY ROBERT ANNAND ID# 5123

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20987

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY DOROTHY CHAPPELEAR ID# 8233

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20988

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY JOHN JUPPE ID# 7480

001

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼
SPECIAL GENERAL

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20989

Amount of Each Disbursement this Period

50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY ANN GABEL ID# 6850

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20990

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address P O BOX 36518

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
EARMARKED BY CRAWLEY JOYNER ID# 4443

001

Category/
Type

Candidate Name
NORMAN, RALPH, W MR. JR, ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) **SPECIAL GENERAL**

State: SC District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C C00416461

Transaction ID : SB23.20991

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RAUL LABRADOR FOR IDAHO

Mailing Address PO BOX 1616

City BOISE State ID Zip Code 83701

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name
LABRADOR, RAUL, R, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) **SPECIAL GENERAL**

State: ID District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00470948

Transaction ID : SB23.20286

Amount of Each Disbursement this Period

5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RAUL LABRADOR FOR IDAHO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1616

City
BOISE

State ID

Zip Code
83701

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

LABRADOR, RAUL, R, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: ID District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C C00470948

Transaction ID : SB23.20425

Amount of Each Disbursement this Period

8100.00

Memo Item

B. RAUL LABRADOR FOR IDAHO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1616

City
BOISE

State ID

Zip Code
83701

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

LABRADOR, RAUL, R, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: ID District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C C00470948

Transaction ID : SB23.20426

Amount of Each Disbursement this Period

2700.00

Memo Item

C. RAUL LABRADOR FOR IDAHO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1616

City
BOISE

State ID

Zip Code
83701

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Category/
Type

Candidate Name

LABRADOR, RAUL, R, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: ID District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C C00470948

Transaction ID : SB23.20427

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. RAUL LABRADOR FOR IDAHO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1616

City BOISE State ID Zip Code 83701

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
LABRADOR, RAUL, R, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: ID District: 01

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00470948
Transaction ID : SB23.20555
Amount of Each Disbursement this Period
5400.00

Memo Item

B. RAUL LABRADOR FOR IDAHO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1616

City BOISE State ID Zip Code 83701

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
LABRADOR, RAUL, R, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)
State: ID District: 01

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00470948
Transaction ID : SB23.20556
Amount of Each Disbursement this Period
5400.00

Memo Item

C. RON DESANTIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1425

City PONTE VEDRA BEACH State FL Zip Code 32004

Purpose of Disbursement
CONTRIBUTION

001
Category/
Type

Candidate Name
DESANTIS, RONALD, D, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: FL District: 00

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C00511568
Transaction ID : SB23.20271
Amount of Each Disbursement this Period
5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

10400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. **RON DESANTIS FOR FLORIDA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1425

City
PONTE VEDRA BEACH

State
FL

Zip Code
32004

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name
DESANTIS, RONALD, D, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00511568

Transaction ID : SB23.20437

Amount of Each Disbursement this Period

8	1	0	0	.	0	0
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Memo Item

B. **RON DESANTIS FOR FLORIDA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1425

City
PONTE VEDRA BEACH

State
FL

Zip Code
32004

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name
DESANTIS, RONALD, D, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00511568

Transaction ID : SB23.20438

Amount of Each Disbursement this Period

2	7	0	0	.	0	0
---	---	---	---	---	---	---

Memo Item

C. **RON DESANTIS FOR FLORIDA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1425

City
PONTE VEDRA BEACH

State
FL

Zip Code
32004

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Category/
Type

Candidate Name
DESANTIS, RONALD, D, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

FEC Identification Number

C00511568

Transaction ID : SB23.20439

Amount of Each Disbursement this Period

5	4	0	0	.	0	0
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Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8	1	0	0	.	0	0
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8	1	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City
SULLIVANS ISLAND

State
SC

Zip Code
29482

Purpose of Disbursement
CONTRIBUTION

001

Category/
Type

Candidate Name

SANFORD, MARSHALL, C. HON., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00285254

Transaction ID : SB23.20289

Amount of Each Disbursement this Period

5000.00

Memo Item

B. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City
SULLIVANS ISLAND

State
SC

Zip Code
29482

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Category/
Type

Candidate Name

SANFORD, MARSHALL, C. HON., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: SC District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00285254

Transaction ID : SB23.20395

Amount of Each Disbursement this Period

8100.00

Memo Item

C. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City
SULLIVANS ISLAND

State
SC

Zip Code
29482

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/
Type

Candidate Name

SANFORD, MARSHALL, C. HON., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00285254

Transaction ID : SB23.20396

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

13100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City SULLIVANS ISLAND State SC Zip Code 29482

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
SANFORD, MARSHALL, C. HON., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: SC District: 01

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C00285254
Transaction ID : **SB23.20397**
Amount of Each Disbursement this Period
5400.00

Memo Item

B. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City SULLIVANS ISLAND State SC Zip Code 29482

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
SANFORD, MARSHALL, C. HON., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)
State: SC District: 01

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00285254
Transaction ID : **SB23.20545**
Amount of Each Disbursement this Period
5400.00

Memo Item

C. SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 160

City SULLIVANS ISLAND State SC Zip Code 29482

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
SANFORD, MARSHALL, C. HON., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: SC District: 01

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C00285254
Transaction ID : **SB23.20546**
Amount of Each Disbursement this Period
5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. TED YOHO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 5745 SW 75TH STREET, #283		FEC Identification Number C00494583 Transaction ID : SB23.20463
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement EARMARKED BY CARY KATZ ID# 7283		Amount of Each Disbursement this Period 5400.00
Candidate Name YOHO, THEODORE, SCOTT, ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 03	

Full Name (Last, First, Middle Initial) B. TED YOHO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 5745 SW 75TH STREET, #283		FEC Identification Number C00494583 Transaction ID : SB23.20565
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 5400.00
Candidate Name YOHO, THEODORE, SCOTT, ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 03	

Full Name (Last, First, Middle Initial) C. TED YOHO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address 5745 SW 75TH STREET, #283		FEC Identification Number C00494583 Transaction ID : SB23.20566
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296		Amount of Each Disbursement this Period 5400.00
Candidate Name YOHO, THEODORE, SCOTT, ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 03	

SUBTOTAL of Disbursements This Page (optional).....▶

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

5400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City RUCKERSVILLE State VA Zip Code 22968

Purpose of Disbursement CONTRIBUTION

001

Category/Type

Candidate Name GARRETT, THOMAS, ALEXANDER MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: VA District: 05

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2017

FEC Identification Number

C00607101

Transaction ID : SB23.19132

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City RUCKERSVILLE State VA Zip Code 22968

Purpose of Disbursement TRANSMITTAL OF EARMARKS

001

Category/Type

Candidate Name GARRETT, THOMAS, ALEXANDER MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: VA District: 05

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C00607101

Transaction ID : SB23.20467

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City RUCKERSVILLE State VA Zip Code 22968

Purpose of Disbursement EARMARKED BY THOMAS PATRICK ID# 4267

001

Category/Type

Candidate Name GARRETT, THOMAS, ALEXANDER MR. JR., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: VA District: 05

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C00607101

Transaction ID : SB23.20468

Amount of Each Disbursement this Period

2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

13100.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City
RUCKERSVILLE

State
VA

Zip Code
22968

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001

Candidate Name

GARRETT, THOMAS, ALEXANDER MR. JR., ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00607101

Transaction ID : SB23.20469

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City
RUCKERSVILLE

State
VA

Zip Code
22968

Purpose of Disbursement
CONTRIBUTION

001

Candidate Name

GARRETT, THOMAS, ALEXANDER MR. JR., ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2017

FEC Identification Number

C C00607101

Transaction ID : SB23.20272

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TOM GARRETT FOR CONGRESS

Mailing Address P.O. BOX 209

City
RUCKERSVILLE

State
VA

Zip Code
22968

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Candidate Name

GARRETT, THOMAS, ALEXANDER MR. JR., ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C C00607101

Transaction ID : SB23.20567

Amount of Each Disbursement this Period

5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

10400.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial) A. TOM GARRETT FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 209		FEC Identification Number C00607101 Transaction ID : SB23.20568
City RUCKERSVILLE	State VA	Zip Code 22968
Purpose of Disbursement EARMARKED BY RICHARD UIHLEIN ID# 4296		Amount of Each Disbursement this Period 5400.00
Candidate Name GARRETT, THOMAS, ALEXANDER MR. JR., ,		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 05	

Full Name (Last, First, Middle Initial) B. WEBER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 1327		FEC Identification Number C00502229 Transaction ID : SB23.20278
City FRIENDSWOOD	State TX	Zip Code 77549
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name WEBER, RANDY, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 14	

Full Name (Last, First, Middle Initial) C. WEBER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 1327		FEC Identification Number C00502229 Transaction ID : SB23.20419
City FRIENDSWOOD	State TX	Zip Code 77549
Purpose of Disbursement TRANSMITTAL OF EARMARKS		Amount of Each Disbursement this Period 8100.00
Candidate Name WEBER, RANDY, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 14	

SUBTOTAL of Disbursements This Page (optional).....▶	13100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD State TX Zip Code 77549

Purpose of Disbursement
EARMARKED BY THOMAS PATRICK ID# 4267

001
Category/
Type

Candidate Name
WEBER, RANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TX District: 14

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00502229
Transaction ID : **SB23.20420**
Amount of Each Disbursement this Period
2700.00

Memo Item

Full Name (Last, First, Middle Initial)
B. WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD State TX Zip Code 77549

Purpose of Disbursement
EARMARKED BY CARY KATZ ID# 7283

001
Category/
Type

Candidate Name
WEBER, RANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TX District: 14

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number
C C00502229
Transaction ID : **SB23.20421**
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)
C. WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD State TX Zip Code 77549

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001
Category/
Type

Candidate Name
WEBER, RANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TX District: 14

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00502229
Transaction ID : **SB23.20553**
Amount of Each Disbursement this Period
5400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD State TX Zip Code 77549

Purpose of Disbursement
EARMARKED BY RICHARD UIHLEIN ID# 4296

001
Category/
Type

Candidate Name
WEBER, RANDY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TX District: 14

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00502229
Transaction ID : SB23.20554
Amount of Each Disbursement this Period
5400.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00
495166.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HOUSE FREEDOM FUND

A. Full Name (Last, First, Middle Initial)
PATRICK, THOMAS, , ,

Mailing Address 9723 NIBLICK LN

City NAPLES State FL Zip Code 34108

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB28A.20208

Amount of Each Disbursement this Period: 2700.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	2700.00