

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

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

FOR LINE NUMBER: PAGE 424 OF 2090

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. HUDSON, MARILYN, , MRS.,

Mailing Address 1698 BOBWHITE TRL

City
STOW

State
OH

Zip Code
44224-2567

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 / D D / Y Y Y Y Y Y
01 / 21 / 2020

Transaction ID : A43E0F530ECED456EA1C

Amount of Each Receipt this Period

30.00

☐ Memo Item

NOTE:EM/PERRY/TRANS20200129

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

B. REISHUS, JOHN, , MR.,

Mailing Address 825 N MERIDIAN ST APT 602
APT 602

City
GREENTOWN

State
IN

Zip Code
46936-1271

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 ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2020

Transaction ID : A43F817FF07C246539CB

Amount of Each Receipt this Period

10.00

☐ Memo Item

NOTE:EM/MILLER/TRANS20200205

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

C. REYNOLDS, JOHN, , ,

Mailing Address 130 FOX DR

City
PIQUA

State
OH

Zip Code
45356-9269

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DENIZEN, INC.

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 07 / 2020

Transaction ID : A441EC8C6EF144B0C94F

Amount of Each Receipt this Period

100.00

☐ Memo Item

NOTE:EM/MILLER/TRANS20200115

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

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

140.00