

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 968 OF 2090  
(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**

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

**A. CAPUTO, MICHAEL, F., MR.,**

Mailing Address 24956 LETCHWORTH RD

City  
BEACHWOODState  
OHZip Code  
44122-4151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.20

Date of Receipt

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

Transaction ID : AC3DF07C7C8334679842

Amount of Each Receipt this Period

75.00

☐ Memo Item

NOTE:EM/GREENE/TRANS20200205

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

**B. RICHTER, GRANT, D., MR.,**

Mailing Address 726 E WOOD

City  
COLUMBIAState  
ILZip Code  
62236-2078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FISERUOccupation (for Individual)  
SOLUTIONS CONSULTANT

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
01	/	27	/	2020

Transaction ID : AC3E331ADE72F41D1BEA

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/MILLER/TRANS20200205

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

**C. OKLESHEN, ROBERT, S., ,**Mailing Address 12730 CAMINITO CANCION UNIT 112  
UNIT 112City  
SAN DIEGOState  
CAZip Code  
92128-2966FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

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

Transaction ID : AC3E47C7424D74BFD82F

Amount of Each Receipt this Period

15.00

☐ Memo Item

NOTE:EM/ TIFFANY/TRANS20200205

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

140.00

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