

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1050 OF 5396

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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. HARDING-KRISTY, KAY, , ,

Mailing Address 14 MARLORVILLE RD

City
WAPPINGERS FALLSState
NYZip Code
12590-3139FEC 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 ▼

150.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	12	2019

Transaction ID : A55E56EF612EC44C0B62

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/BUDD/TRANS20190822

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

B. FRECK, WILLIAM, B., ,

Mailing Address PO BOX 190

City
WILSONVILLEState
ORZip Code
97070-0190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	10	2019

Transaction ID : A55ED882A133245F7BEF

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/HERRELL/TRANS20190815

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

C. BROPHY, CARLEEN, , ,

Mailing Address PO BOX 1185

City
JACKSONState
WYZip Code
83001-1185FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

14000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	02	2019

Transaction ID : A55F07FECB95347DDBF1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

NOTE:EM/PERRY/TRANS20190807

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

2550.00

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