

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

FOR LINE NUMBER: PAGE 1802 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 |
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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. MASLOV, JACK, L., MR.,Mailing Address 190 HOFFMAN AVE APT 41
APT 41City
AUBURNState
CAZip Code
95603-4248FEC 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 ▼

10.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 15 | / | 2019 |

Transaction ID : AA15473F42A734E319DD

Amount of Each Receipt this Period

5.00

☐ Memo Item

NOTE:EM/JORDAN/TRANS20190822

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

B. GAVIN, ALAIN, , ,

Mailing Address 9235 LOREL AVE

City
SKOKIEState
ILZip Code
60077-1145FEC 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 ▼

10.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 28 | / | 2019 |

Transaction ID : AA160735DCDA14FB9A1A

Amount of Each Receipt this Period

5.00

☐ Memo Item

NOTE:EM/BISHOP/TRANS20190904

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

C. PASTELAK, JANE, F., MRS.,

Mailing Address 1192 LAURELWOOD RD

City
POTTSTOWNState
PAZip Code
19465-7422FEC 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 ▼

220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 13 | / | 2019 |

Transaction ID : AA16659C290C5410ABEC

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/JORDAN/TRANS20190822

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

60.00

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