

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

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

FOR LINE NUMBER: PAGE 4002 OF 10806

(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

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

A. FERGUSON, SARAH, , MS.,

Mailing Address 1622 CROWN VUE CT

City
STATESVILLEState
NCZip Code
28625-6008FEC 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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : AD05B75C7C3F24615A79

Amount of Each Receipt this Period

15.00

☐ Memo Item

NOTE:EM/NORMAN/TRANS20180919

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

B. HOLLAND, CRAIG, , ,

Mailing Address 2903 DICKENS CIR

City
CONWAYState
ARZip Code
72034-6187FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DILLARDSOccupation (for Individual)
MANAGER

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
09 / 02 / 2018

Transaction ID : AD05C4772A7C347C3BC2

Amount of Each Receipt this Period

2.00

☐ Memo Item

NOTE:EM/RIGGLEMAN/TRANS20180911

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

C. SMITH, THOMAS, E., ,

Mailing Address 1004 SOUTHRIDGE WOODS BLVD

City
MONMOUTH JCTState
NJZip Code
08852-2383FEC 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 ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2018

Transaction ID : AD05DE35329B241339EE

Amount of Each Receipt this Period

15.00

☐ Memo Item

NOTE:EM/BLUM/TRANS20180926

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

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

32.00