

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 209
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TAKE BACK THE HOUSE 2020

A. GREENLEAF, JAMES, MEEHAN, , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 BAY MIST DRIVE

City ERIE	State PA	Zip Code 16505
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENLEAF CORP	Occupation (for Individual) EXECUTIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : A47A8D487610B4545A94

Amount of Each Receipt this Period
1250.00

Memo Item

B. GREENLEAF, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 BAY MIST DRIVE

City ERIE	State PA	Zip Code 16505
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENLEAF CORP	Occupation (for Individual) MANAGER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : A391B49728C254089880

Amount of Each Receipt this Period
1250.00

Memo Item

C. GROFF, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9832 CALVIN AVENUE

City NORTHRIDGE	State CA	Zip Code 91324-1619
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2020

Transaction ID : ABA1D1CF9CF3E4DB1B55

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	27500.00
TOTAL This Period (last page this line number only).....	