

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

FOR LINE NUMBER: PAGE 17 OF 1916

(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. MILAN, WILLIAM, E., MR.,**

Mailing Address 1258 E 2625 N

City  
OGDENState  
UTZip Code  
84414-2615FEC 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 ▼

600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	05	2020

Transaction ID : A03FF71111A5C4D0293C

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. FREUND, LYNNE, H., MRS.,**

Mailing Address 4884 TRENTON FRANKLIN RD

City  
MIDDLETOWNState  
OHZip Code  
45042-1541FEC 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 ▼

350.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	05	2020

Transaction ID : ADE62948A572C4BC39B9

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. JONAS, NOBLE, W., ,**

Mailing Address PO BOX 333

City  
NEW PALESTINEState  
INZip Code  
46163-0333FEC 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 ▼

600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	05	2020

Transaction ID : A12BE8C41E2304C0BAB0

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

300.00

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