

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

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

FOR LINE NUMBER: PAGE 914 OF 1916

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. EVANS, REID, , ,**

Mailing Address 1610 WILLARD RD NW

City  
PALM BAY

State  
FL

Zip Code  
32907-6320

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2020

Transaction ID : AEECAB326DFAA4180BE

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/ TIFFANY20200409

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

**B. CLANCY, TIM, , ,**

Mailing Address 1421 STAGECOACH TRL

City  
GORDON

State  
TX

Zip Code  
76453-3929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AEEEC8AD6321141B6990

Amount of Each Receipt this Period

56.00

☐ Memo Item

NOTE:EM/BENNETT/TRANS20200311

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

**C. GREAVES, DANIEL, J., MR.,**

Mailing Address 7 HUDSON ST

City  
BANGOR

State  
ME

Zip Code  
04401-4617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2020

Transaction ID : AEEFE2E3977C24D2693E

Amount of Each Receipt this Period

100.00

☐ Memo Item

NOTE:EM/ TIFFANY20200318

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

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

181.00