

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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. BEELMAN, GREGORY, , ,

Mailing Address 7939 W SANDS DR

City
PEORIAState
AZZip Code
85383-2187FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QUALITY HOME CAREOccupation (for Individual)
PHYSICAL THERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2020

Transaction ID : AFB59093F66064095B7A

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/HERRELL/TRANS20200226

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

B. VOLCK, THOMAS, , ,

Mailing Address PO BOX 106

City
VANDALIAState
OHZip Code
45377-0106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THOMAS C VOLCK DDSOccupation (for Individual)
THOMAS C VOLCK DDS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2020

Transaction ID : AFB5DAF01EC134CDDA7A

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/MILLER/TRANS20200212

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

C. WRIGHT, RAYMOND, , ,

Mailing Address 11038 RIDGE RD

City
NEVADA CITYState
CAZip Code
95959-8750FEC 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 ▼

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2020

Transaction ID : AFB76BC72DDF543BDBB9

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/GREENE/TRANS20200305

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

100.00

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